

# The Social Life of Blind People



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American Foundation for the Blind, Research Series No. 19





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# The Social Life of Blind People

Eric Josephson

Research Series No. 19

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## Foreword

It has become increasingly apparent that there is a disparity between the characteristics and needs of blind people on the one hand and the programs of agencies serving them on the other. In the United States today blindness is far more likely to affect persons of middle and old age than children or young adults. Furthermore, as this study shows, many elderly blind people are poor, immobile, unaided, and cut off from communities which favor youth, not old age. However, apart from providing financial assistance to those most in need, agencies serving blind persons have tended to concentrate their attention on the young, the employable, and the potentially mobile. Evidence from this and other recent studies suggests that a reorientation of agency problems is urgently needed if they are effectively to serve all blind persons and to achieve the objective of integrating them in the community.

To be sure, not all blind persons can be fully integrated—for example, those with other chronic conditions. But if this study reveals how deprived, inactive, and isolated some blind people are, it also shows—perhaps most surprisingly—how energetically others take advantage of the opportunities for cultural and social life which their communities offer. Thus, thanks to recorded books, blind people apparently read more books than their sighted contemporaries.

Nevertheless, much remains to be done to give all blind persons beyond working age the opportunity to enjoy their enforced idleness in ways that will not result in stigmatizing them. But if these goals are to be reached, we need to know more about the interests and capabilities of the blind. This study, based on interviews with nearly 700 blind adults in four states, is a significant contribution to the knowledge for intelligent planning and action for the welfare of the blind.

Work on this study was carried out by Eric Josephson, Ph.D., when



he was a staff member of the Research Department of the American Foundation for the Blind. He is now Assistant Professor of Public Health Practice at the Columbia University School of Public Health and Administrative Medicine, New York City.

M. Robert Barnett  
Executive Director  
American Foundation for the Blind

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The original idea for this study of blind persons and their use of leisure was suggested by Miss Kathern F. Gruber, formerly Director of the Division of Research and Specialist Services, American Foundation for the Blind. I wish to acknowledge her enthusiastic support during the early stages of the research and that of other present and former staff members of the Foundation who have contributed to the design of the study and to the analysis of data from it—notably Dr. Milton D. Graham, Director of the Research Department; Mr. Richard Onken, formerly Research Assistant in that Department; Mr. Harold G. Roberts, formerly Director of the Program Planning Department and now Associate Director for Services; Miss Helga Lende, former Librarian; Dr. Susan Millman and Mrs. Edith Duval, former staff members.

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Last but not least, I wish to acknowledge the very considerable assistance of my wife, Mary Redmer Josephson.

I, of course, am solely responsible for any errors which remain.

Eric Josephson



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## Impairment and Leisure

One of the many paradoxes of modern society is that while we have triumphed against the plagues that once decimated whole populations, we have so far had little success in combating the chronic conditions of adulthood and old age. More and more people live well beyond the period of retirement, only to face in their declining years a host of physical ailments—arthritis and rheumatism, deafness and other hearing impairments, heart conditions and high blood pressure. Many suffer deterioration of vision and some become blind.

Rare as it is, however, of all the physical afflictions which beset mankind few seem to arouse as much fear as blindness or as much pity for those who are struck by it. The ancient Jews regarded blindness as the greatest of all infirmities. "There is no greater pain nor more bitter suffering than that which blindness brings," says one old text. "The blind man is as one dead," claims another. So too in ancient Greece. In Sophocles' 2500-year-old tragedy, *Oedipus Rex*, "You were better dead than blind," shouts the chorus to King Oedipus (after he has plucked out his own eyes). But Oedipus, who wants to be punished for his terrible sins, replies: "No, it is better to be blind."

Not so Gloucester in Shakespeare's *King Lear*. Blinded at the command of Lear's monstrous daughter Reagan, Gloucester cries: "As flies to wanton boys, are we to the gods. They kill us for their sport." And Shakespeare himself indulges a cruel sport at Gloucester's expense. In a bizarre scene Gloucester's son convinces his blind father that the grassy knoll on which he stands is the high cliff at Dover. When Gloucester leaps, as he thinks to his death, he merely falls flat on his face on level ground.



Although attitudes have changed and we of the twentieth century are likely to be more sophisticated about such things, a catastrophic view of blindness as a fate worse than death survives down to this very day. Before the nineteenth century many sightless people—unless wealthy—had to resign themselves to a beggarly existence. The idea of their leading useful, rewarding lives is relatively new. It is so new that many people, not blind, simply do not believe it.

And while it is not considered good taste, we too sometimes laugh at the blind; for evidence one need only look at the violent adventures of a well-known TV cartoon character, Mr. Magoo, presumably only nearsighted but for all practical purposes as blind as a bat. Our children are encouraged to think he is comical.

Another common attitude, inspired by sentimental literature and by fund-raising campaigns, is amazement at the accomplishments of a few extraordinary blind people, such as Helen Keller. Many of these stories would almost have us regard blindness as a blessing. The fact is that while some people have overcome many of the handicapping consequences of blindness and lead rich, full lives, for most blind people loss of sight is a disaster. It is certainly calamitous for a child, fated to spend the rest of his life in a world arranged for those with sight, and for his parents; it is possibly even more disastrous for an older person who, after years with sight, must somehow adjust to life without it. The Reverend Thomas J. Carroll, a leader in the rehabilitation of blind people, regards the blindness of adult life as a “dying.” He writes: “When, in the full current of his sighted life, blindness comes on a man, it is the end, the death, of that sighted life.”

Blindness is truly a terrible physical impairment, and however exaggerated our fears of it, they have their roots in a basic characteristic of human physiology: if we can see we get more “information” about the physical world through our eyes than any other sense organ. People with very little or no vision are therefore cut off from an irreplaceable means of communication with the world about them. And, as I shall try to show, because of our social policies regarding blindness, they also find themselves cut off in another and no less important way from the communities in which they live.

This then is the ultimate tragedy of blindness for many of those it strikes. Regarded and treated as helpless and dependent, they react in helpless and dependent ways, with all that that means in loss of self-

respect. Or, as Hector Chevigny (himself blind) has written: "The tragic aspect of blindness does not inhere in the condition nor can it do so. In nature it is absent. It is an entirely civilized idea. The world in which a man finds himself creates the tragedy for him and in him."

At a time when so many social problems press in upon us, blindness may seem relatively inconsequential. After all, there are not very many sightless people to worry about. But their curiously ambiguous status (the result of neglect as well as pity) presents a unique challenge to our "affluent" society. What does that society hold for blind people?

This report, based on interviews conducted by the American Foundation for the Blind with 684 blind adults in five scattered parts of the United States attempts some answers to that question. (The methods used to collect data are described in Appendix B.) Before presenting findings from the survey, however, I want briefly to discuss a number of social trends that have particular significance for the life chances of blind persons.

## FREE TIME AND LEISURE

"We are in an age of leisure." So begins a recent study of the phenomenon. One of the many enduring myths about our society is that we have such an abundance of leisure that we hardly know what to do with it. According to some observers, Americans enjoy greater freedom from work and responsibility than has ever before been seen on earth. As evidence, they point to the great drop in the workweek (from 70 hours in 1860 to 37 hours a century later), the trend toward earlier retirement, the number of passenger cars on the road, the hours we spend watching television, the spread of labor-saving devices in the home and of do-it-yourself activities, and the increasingly enormous amounts of money we spend on recreation—twenty-three billion dollars in 1963, not including travel (1). No doubt about it, say such commentators, we are the most affluent of all nations, and our affluence is certainly reflected in our leisure.

But is this picture complete or accurate? To begin with, as Sebastian de Grazia and a number of other writers have suggested, it is necessary to distinguish between leisure and free time. They are not synony-



mous. Following the ancient Greeks, de Grazia defines leisure as a "state of being free of everyday necessity. The man in that state is at leisure and whatever he does is done leisurely." On the other hand, free time is "time off the job that [is] neither work-related nor subsistence time"—for example, time spent on activities like eating or sleeping (2). To enjoy leisure, people must have free time; but not all free time is spent leisurely.

For many people in our work-oriented society leisure is still a dream. The fact is, as Harold L. Wilensky has demonstrated, that we have an extremely uneven distribution of leisure: some people have a great deal of it, while others, perhaps most, have little or none. Wilensky writes: "The average man's gain in leisure with economic growth has been exaggerated. Estimates of annual and life-time leisure suggest that the skilled urban worker may have gained the position of his thirteenth-century counterpart. Upper [managerial and professional] strata have, in fact, lost out. Even though their worklives are shorter and vacations longer, these men work many steady hours week after week—sometimes reaching a truly startling total" (3).

Indeed, the growth of leisure is more apparent than real; and there is some evidence that our gain in free time has been nowhere as great as the reduction of the workweek would suggest. De Grazia has calculated that while the average workweek in the United States has been reduced by approximately thirty hours in the last century, the actual gain in free time has been only a few hours (4). One of the explanations of this lag is that we spend an unprecedented amount of time traveling to and from work—over eight hours a week on the average. Furthermore, the shorter workweek, instead of increasing opportunities for leisure, has encouraged growing numbers of men and women to take on second jobs (5). According to a study made some five years ago, 3.6 million Americans, or 5.3 percent of the working population, had more than one job. But moonlighting is only one way in which our time is spent. For even greater numbers of people time after work is taken up with sleep, eating, household chores, study, and other personal duties. These then are some of the ways in which our so-called free time is reduced.

In other words, the millennium of leisure has yet to arrive. But there is no disputing the probability that it may arrive in the foreseeable future—as the workweek shortens further and as machines increasingly



replace human labor. Whether we shall be organized and educated to use the great increase in leisure remains to be seen.

Meanwhile, what do we do with the leisure we have? First, we seem to spend a lot of time sitting. As Herbert Collins writes: "Not only is the chair the conspicuous container of modern man, but sitting is the symbolic posture of the age of science and technology" (6). To illustrate, a recent study shows that among Americans 18 years of age and over, watching television, visiting friends or relatives, reading, working around the yard or garden, pleasure driving, joining clubs or organizations, participating in sports, and hobbies—in that order—are the major ways in which leisure time is spent (7). Except for gardening and sports, all these activities are sedentary in nature. Few people walk for pleasure; few go dancing. As we shall see later, age and health are important determinants of the bodily posture—sitting or upright—in which leisure time is spent.

Another approach to our use of leisure has to do with its mass character: millions of people are exposed to the same influences, notably television. As Wilensky writes: "The mass media are the core of American leisure and . . . television has become the core of media exposure. . . . Nine of ten American homes average five to six hours daily with the TV set on. And it is not just turned on; it is generally being watched. Eight in ten Americans spend at least four hours a day viewing television, listening to the radio, or both." And he adds: "Mainly due to the rise of television, the media together and on the average now take up almost as much time as work; substantial minorities log more hours a year in TV viewing alone than in working" (8).

However, it is not just the enormous amount of time devoted to television which has alarmed some observers, but the vulgarity of mass culture and its threat to traditional "high" cultural values (9). According to these critics, such leisure becomes meaningless, a packaged mass activity, its values provided chiefly by an entertainment "industry." We stress "industry" because television, our major leisure activity, is a commercial enterprise: its primary function is to sell products. Hence Wilensky's conclusion regarding exposure to mass culture: "To be socially integrated in America is to accept propaganda, advertising, and speedy obsolescence in consumption." But while men are trained for work and consumption, they are not trained to spend leisure creatively.

If some achieve freedom for an hour or a day, others, Robert Mac-

Iver points out, find only a "great emptiness." Escaping from work, they try to escape also from themselves.

Is this leisure? De Grazia argues that it is not, that we lead "a life without leisure. . . . For leisure is not hours free of work, or even week-ends or months of vacation or years in retirement. . . . Indeed, the contemporary phrase 'leisure time' is a contradiction in terms. Leisure has no adjectival relation to time. Leisure is a state of being free of everyday necessity, and the activities of leisure are those one would engage in for their own sake. As fact or ideal it is rarely approached in the industrial world" (10).

According to de Grazia and other critics, only the ancient Greeks really appreciated and properly used leisure. But leisure in classical Athens was enjoyed chiefly by a few owners of slaves; the slaves themselves had little or no such freedom. Today we live in an age of mass democracy, in which millions demand their leisure rights. An opposing—and in my opinion more reasonable—view of the problem is suggested by the French sociologist, Georges Friedmann: "It would be unrealistic to ignore the far-reaching developments now taking place, despite all the hostile influences . . . in the active use of leisure. This includes all the wide variety of ways whereby individuals, after finishing work, seek to satisfy their need for participation and creation, with results ranging from complete failure to full self-expression. They take the form of odd-jobs and craft work at home; widespread 'amateur' artistic activities, encouraged by the mass media; competitions of all kinds, whether or not organized for publicity purposes; successful recreational clubs; mass exoduses at weekends and holidays; the multiplication of leisure clubs—all these speak the same language. Only peevish moralists or intellectuals clinging to the splendors of the past and out of touch with the times can assert that the average modern man is doomed, after finishing work, to apathy and debasement. On the contrary, experience shows, despite all the obstacles . . . his capacity for resistance and, above all, the opportunities to which he has access" (11).

In short, although modern man has less leisure than is commonly thought and while he may spend it in absurd ways, still he *has* it. What use he makes of it, however, is another matter, determined largely by his wealth, age, health, and physical and intellectual endowment.



## AGE, IMPAIRMENT, AND LEISURE

Can enforced inactivity properly be termed leisure? I think not. In our society millions who are marginal to the economy are driven into idleness, and it is safe to assume that many of them would gladly exchange their idleness for work. I refer here not only to the many millions of unemployed, sick, and disabled, but to most although by no means all of the aged—since in 1960 nearly 20 percent of all men 65 and over were employed. Such idleness, however, should not be confused with leisure.

Nevertheless, with earlier retirement from work and more people living beyond retirement, our elderly population has begun to form a unique and growing leisure class. Since 1880, the proportion of our population 65 and over has risen from only 3 percent to nearly 10 percent; and at the present time there are some ten million retired persons living in the United States. Not all blind people are elderly, but in view of the increasingly close association between blindness and old age, it may be helpful briefly to examine the general relationship between age and leisure.

We begin with a seeming paradox. Old people who are not working have more leisure than their juniors who are employed; but even so, old age cuts into the leisure that we would otherwise expect to find in this period of life. Why this is so has to do with the physical process of slowing down or decline which aging represents. What this means, as Robert J. Havighurst has suggested, is that “old people do less within a unit of time. They spend more time accomplishing a given amount of work”—“work” here referring to the tasks and duties of everyday living (12). Thus, evidence is available that older people enjoy more leisure than their juniors. For example, according to one study women over 50 have nearly six hours of leisure to spend each day; but this is only *one and a half hours* more than that available to women under 50 (13). A recent survey in Wichita, Kansas, showed that men 60 and over had less than one hour more of leisure than younger men (14).

This small gain in leisure time is hardly surprising if we remember that it is in old age that one is most likely to suffer chronic conditions and physical impairments (such as blindness) that seriously limit activity and mobility. In the United States, according to several recent studies conducted by the National Health Survey, more than two fifths of

the total population have one or more chronic conditions of varying severity. But while only 35 percent of those in the 15-to-29 age group have had such conditions, the corresponding rate among persons 65 and over is 77 percent, and for those 75 and over the rate is 83 percent. Furthermore, while only 5 percent of the younger age group have suffered some limitation on their ordinary activities—such as housework and employment—the corresponding figure for those 65 and above is 42 percent and for persons 75 and over it is 55 percent (15).

There is a similar relationship between age and physical mobility. According to the same National Health Survey, less than 1 percent of persons 15 to 29 suffer some limitation of mobility—which may range from confinement to the house at one extreme to limited mobility or need of help in moving around outside the house; but the corresponding figure for persons 65 and over is 18 percent, and for persons 75 years and over the rate is more than 30 percent (16).

Unfortunately, we have little data on the direct impact of chronic conditions on the uses of time. But it takes little imagination to infer from the statistics of activity and mobility limitations among the aged just what the consequences are. If old people on the whole enjoy considerably less leisure than is commonly assumed, the chronically impaired among them are even more critically restricted.

It is precisely these limitations on activity and mobility that help determine patterns of leisure activities among the aged and the chronically impaired. As one would expect, the process of growing old means for many a decrease in activities that require physical ability or strength. With increasing age men and women tend to give up the more active leisure pursuits—especially driving for pleasure, going to dances, and participating in sports or going to sports events (17). In a sedentary society old people stay at home and pursue their leisure interests at home. According to one study of persons 60 and over, 85 percent of their leisure activities took place in their own homes or in the homes of friends and relatives (18).

Equally important to an understanding of leisure in old age—and by implication among the chronically impaired—is the degree to which they are integrated in the community. In the United States a growing army of the aged finds itself increasingly cut off from family life and from meaningful pursuits. Thus, several recent studies (19) show that while most Americans are prepared to offer financial help to their eld-



erly parents, they actively discourage their parents' living with them.

Thus, while life is prolonged and occupational retirement takes place relatively early, with the breakdown of the extended family, the aged become outcasts in our society, which emphasizes youth and energy. Separate housing, even separate cities—this is the lot of many of our elderly citizens. More than one quarter of all Americans 65 and over now live alone. This does not necessarily mean that they are all socially isolated, but their social isolation has increased. Many of the aged find themselves cut off not only from family and friends, but from “secondary” attachments as well—that is, from organized community life. Wilensky writes: “When every morning sees a thousand more men and women aged 65 and over, when the typical case feels more deprived, emotionally and financially, than the rest of the population and has fewer and weaker secondary ties to constrain the response to deprivation, the threat to democratic political order and responsible community action is real” (20).

Such statements suggest that the responsibility for the isolation of the aged rests primarily with their families and with the community. Is this withdrawal entirely involuntary? Elaine Cumming suggests not. She writes: “Aging is an inevitable mutual withdrawal or disengagement, resulting in decreased interaction between the aging person and others in the social systems he belongs to. The process may be initiated by the individual or by others in the situation. The aging person may withdraw more markedly from some classes of people while remaining relatively close to others. His withdrawal may be accompanied from the outset by an increased preoccupation with himself; certain institutions in society may make this withdrawal easy for him. When the aging process is complete, the equilibrium which existed in middle life between the individual and his society has given way to a new equilibrium characterized by a greater distance and an altered type of relationship” (21).

If aging is characterized by a process of disengagement, how should we evaluate the rather considerable organizational and institutional efforts to engage old people in recreational and other activities? Underlying such efforts is another, although less explicit, belief about aging—namely, that engagement is desirable in successful “adjustment” to old age. Hence the exhortations to remain active, to do things—anything.

Available evidence suggests that some people do indeed disengage,

while others remain active participants in community life (22). But this in turn is related to another major social characteristic of the aging process: the relative stability or consistency of behavior (23). In other words, old people who in earlier years had been active social participants remain active as long as they are able, while those who had been isolated remain isolated. There is then a selective factor in the tendency of some old people to "join" activities especially selected for them, and in the refusal of others to do so (24).

## POVERTY AND LEISURE

The last but by no means the least important aspect of leisure I want to consider has to do with material wealth. Poverty and the enjoyment of leisure are incompatible, at least in our culture; and the two groups we have been describing—the aged and the disabled—are very poor indeed. How poor?

According to a recent survey of income among the aged, 42 percent of married couples aged 65 and over had an income of less than \$2,500 in 1962, and 65 percent of nonmarried persons aged 65 and over had an income under \$1,800—the minimum required respectively in each group for what the Bureau of Labor Statistics then called a "modest but adequate" standard of living (25). These figures confirm what earlier reports had shown—that is, that at least half our aged population cannot afford decent housing, nutrition, and medical care, let alone recreation. As Michael Harrington writes: "They are some of the most incredible figures to be found in American society"; he adds: "America tends to make its people miserable when they become old, and there are not enough phrases in the dictionary to gloss over this ugly reality" (26).

The physically disabled—many of them elderly as we noted—are also disproportionately impoverished. Recent studies have made this abundantly clear. One of them, conducted by the University of Michigan's Survey Research Center, shows that while 36 percent of adult family units containing disabled persons have family incomes which cover less than nine tenths of their budgetary requirements, only 22 percent of the national population fall below that level (27). A recent government survey provides further evidence of the close relationship



between physical disability and low income. According to the National Health Survey, nearly 45 percent of the total American population have one or more chronic conditions. But while only 43 percent of those with a family income of \$7,000 or more reported such conditions, the proportion among those with an income under \$2,000 was 58 percent. Not only were poor people more likely than the prosperous to have chronic ailments; among those with incomes under \$2,000 the proportion with an activity limitation was three and a half times as great as it was among persons with a family income of \$7,000 or more. Similarly, poor people were nearly five times as likely to suffer a limitation on mobility or be confined to the house as were persons with higher incomes (28). It is important also to recognize that while poor people are more likely to suffer inferior health, physical disability itself tends further to limit income. As the authors of the Michigan study conclude: "Disabilities serve to compound the problems of low levels of education, advanced age, and unskilled occupations, so that for most of the disabled incomes are inadequate and resources are scarce." As we shall see later, blind people are poorer than the poor.

How does such poverty affect leisure behavior? The most obvious way is that in a society such as ours where leisure for many is the consumption of things, the poor simply cannot afford musical equipment, sports supplies, books, magazines, toys, theater tickets, membership dues, seats at sports events, and so on (29). However, monetary income alone does not determine class differences in leisure behavior—which are considerable, as R. Clyde Whyte has shown (30)—but its importance cannot be underestimated, particularly for the millions of aged and disabled who live in the most abject state of poverty.

Furthermore, although the amount of leisure available does not necessarily increase with wealth (as we noted earlier, professional classes seem to have relatively little free time) its *uses and values* most certainly vary with income. The idleness of the involuntarily unemployed or the disabled cannot be compared with the leisure (however reduced) of healthy, hard-working professionals and managers. Among the former idle hours may be only an anxious drain on limited physical and emotional resources if not completely demoralizing, providing no offset to poverty; while for the latter leisure may be regarded as a substitute or even as a supplement to income (31). But the real reason why leisure and poverty are incompatible is that if, as de Grazia suggests,

leisure means freedom from necessity, such freedom is precisely what poor people do not have, even if they are idle.

If I have stressed the problems of the aged and the poor, it is because old age and poverty are perhaps the most significant characteristics of blind persons, as the next two chapters will indicate.



## 2

# The Demography of Blindness

Blindness imposes special limitations on social life and on the pursuit of leisure interests; it also creates some fairly unique opportunities for that pursuit, as we shall see. Before looking into the ways in which blind people use their leisure, I want briefly to summarize what we know about their numbers and their major physical characteristics.

### THE PREVALENCE OF BLINDNESS (1)

Despite great interest in the phenomenon of blindness and an enormous literature, we have little reliable data about its prevalence. There are many reasons for this state of affairs. Blind people are few in number and scattered throughout our vast nation; furthermore, many of them are understandably reluctant to be counted—and thereby categorized. Recent years have seen a serious effort to fill great gaps in the statistics of blindness, but we still must rely chiefly on estimates. As a result, we can make few definitive statements about the size of our blind population, let alone the characteristics of those who lose their sight (2).

The little that we do know comes from three sources of information. One of them—the most widely accepted estimate of our blind population—is represented by the work of Ralph Hurlin. For twenty years Hurlin has been making estimates of prevalence. In 1960, he calculated that there were approximately 385,000 blind persons in the United States. This amounted to a prevalence rate of 2.14 per thousand population for the country as a whole, although state rates varied consid-

erably—ranging from a high of 3.98 in Hawaii to a low of 1.39 in Utah (3). These estimates have served as the primary basis for planning by public and private agencies.

A second source of information about the statistics of blindness is represented by the Model Reporting Area for Blindness Statistics. Launched in 1962 by the National Institute of Neurological Diseases and Blindness, the Model Reporting Area is designed to encourage complete reporting of blind persons by the states as well as standardization of reporting and recording procedures. So far fourteen states have joined the project (with more in the process of joining), but since they are not representative of the country as a whole, no nationwide estimates may be derived from their reports. As more states join, however, the Model Reporting Area should become a major source of data on the prevalence and incidence of blindness—limited by the difficulties inherent in any medical registration and especially by the unwillingness of some blind people to be registered. Perhaps the greatest achievement of the Model Reporting Area to date is that it has introduced high standards of data collection in a field that rarely needed them (4).

A third source of information about severe visual impairment (and therefore by implication about blindness as well) is represented by the National Health Survey. In the work of that survey, based on household interviews with a nationwide sample of the population, people are classified as “severely” impaired if they report themselves as unable to read ordinary newspaper print even with the aid of glasses. Here we have what has been called a functional or behavioral definition of blindness; that is, it describes people who *behave* as if they were blind and it undoubtedly includes many who are not legally blind or whose visual acuity could be improved considerably with optical aids. On the basis of this definition, 988,000 persons were reported as severely impaired in 1959–61—a figure nearly three times as great as that ever reported for legal blindness (5).

A major criticism of National Health Survey data is that they are based on what people themselves report about their impairments and hence are subject to error, since some persons may exaggerate—and others underestimate—the extent of their visual difficulties. That is, what people say about their vision or lack of it may be significant as an indication of how they perceive themselves, but this does not necessarily correspond with clinical measurements (6).



More recently, the National Health Survey has conducted standard vision tests with a cross section of the population 18 through 79 years of age. The projected figures from this sample showed a total of 889,000 persons (or nearly 1 percent of all Americans between 18 and 79) whose "corrected" distance vision was 20/200 or less. Although the authors of the Health Survey warn us that "neither the testing nor the examination procedures . . . were sufficient to provide the basis for making a more precise estimate of the prevalence of blindness," this report is without doubt the most startling yet to appear in the tangled history of blindness statistics. Even allowing for error, it suggests that there are at least a million blind persons—again, nearly three times the most commonly accepted estimate (7).

Here then are a number of estimates of the blind and severely impaired population. None of them agree—which is not surprising since they differ in their definitions of visual impairment as well as in the basis for making the estimate. It is not my purpose here to resolve differences among these estimates. The fact is that we simply don't know how many blind people live in the United States—or in most other countries for that matter. And until we get complete registration of blindness or improve our methods for testing vision and apply those methods to representative samples of the entire population, we are unlikely to know more than we do now. Does it matter?

It does matter in planning services, or in making reliable statements about the vocational, medical, recreational, or other needs of blind persons. It also seriously affects our ability to say something about trends in the prevalence of blindness. Many informed people have guessed that blindness is increasing. What evidence do we have?

The major piece of evidence comes from Ralph Hurlin's estimates of the blind population. Hurlin figured in 1940 that there were approximately 230,000 blind people in the United States; by 1960, as we saw, he estimated a nationwide blind population of some 385,000—an increase of 67 percent. If these figures are reliable, they suggest that our blind population has been increasing nearly twice as fast as the total American population (which rose by only 36 percent between 1940 and 1960). In North Carolina, which has maintained a register of its blind citizens since 1935, the registry almost doubled between 1940 and 1960, while the total state population increased only 28 percent.

These figures are subject to considerable error; nevertheless they



suggest that the number of blind people has been growing rapidly. Part of this trend is due to the absolute increase in population. Most of it, however, is due to the fact that more Americans live beyond middle age and reach a point in the life cycle at which the risk of blindness, as well as other impairments common to the elderly, mounts sharply. Age, therefore, is perhaps the single most significant biosocial characteristic of blind persons today (8).

To illustrate further, let us compare the age of blind people with that of the general population. Our most reliable information about the age characteristics of blind people comes from the Model Reporting Area for Blindness Statistics. In the ten states composing the Area in 1963, only 9 percent of their total populations were 65 or over; but the corresponding proportion among their 43,000 blind registrants was 45 percent. Indeed, the prevalence or rate of blindness among persons 65 and over is thirty times as great as the rate among those under 20. Furthermore, new cases of blindness—of which the three major known causes are cataracts, glaucoma, and diabetes—are far more likely to occur among older than among younger age groups: in the Model Reporting Area states in 1962 and 1963 well over 40 percent of all new cases of blindness struck persons 65 and over. In our own study of 684 blind adults (21 and over), one third were 60 or over when blindness struck them; only one eighth had been blinded before the age of 3. For some, of course, the experience cannot be pinpointed in time; rather, it is a gradual process of deterioration which may continue over a period of many years.

What we know about the relationship between aging and blindness permits us to make some very rough guesses about the future growth of the blind population. Thus, on the assumption that prevalence rates will not vary significantly from their present level, it has been estimated that between 1960 and 1985 the number of blind people will rise from 385,000 to 540,000—an increase of 40 percent, or somewhat more than the expected growth of the total American population. Some of this will be due to the enormous absolute increase in the number of people under 20—among whom the prevalence of blindness more than doubled between 1940 and 1960. But most of the growth will be due to the expected absolute increase in the number of Americans 65 and over—from just under 17 million in 1960 to nearly 25 million in 1985. Indeed, it is estimated that the number of blind persons 65 and over will have grown



from 181,000 in 1960 to 274,000 by 1985—an increase of 50 percent (9).

The demography of blindness in the United States today may be summed up as follows: the spectacular drop in the infant mortality rate has meant that children who in the past would not have survived (for example, premature babies) now have a much better chance of surviving—with or without impairments. So too at the other end of the life cycle. Many people who in times past would not have lived to reach old age now do so—but at the price of spending their remaining years with chronic ailments. As a demographer said: “In contrast to the past, when preventive [health] measures were the principal factor in gains in longevity and reductions in mortality, future benefits will come largely by prolonging the lifetimes of the physically impaired” (10).

It is this particular demographic “revolution” that creates new problems of social planning for blind persons as for those with other chronic conditions. And it is precisely because elderly blind people, although growing in number, have been neglected by welfare services that I propose to stress their needs in this report. My study was therefore deliberately limited to people 21 and over—a category that includes at least four fifths of all blind persons.

## SELF-PERCEPTION

To begin with, not all blind persons are entirely without some useful vision. Data based on visual acuity measurements of the blind indicate that less than one fifth have experienced total loss of sight, that an equal proportion have “light perception” (the ability to distinguish between light and dark), and that perhaps as many as one quarter have enough remaining vision for at least a limited degree of traveling or for reading with optical aids. In our own study of 684 blind adults more than 40 percent reported that they had enough sight to get about; 14 percent said that they could see to read ordinary newspaper print (nearly as many as reported themselves totally blind). This, however, was what respondents *told* us; we did not attempt clinically to validate their reports (11). Whatever their limitations, such reports are not entirely without value; as will be seen, they tell us how visual impairment is



perceived by those who experience it and also help explain many behavioral differences among them (12).

Does visual acuity among the blind vary with such factors as their age and the time of life in which they began to lose their sight? There is little reliable information available to help us here. Among our respondents, those with reading vision were considerably younger than the totally blind; consequently they were also more likely to have experienced the onset of blindness early in life. This may be due partly to peculiarities of our sample, but even more to the fact that young blind people today receive better training in the use of their remaining vision.

No less important than the extent of their visual loss is their perception of it. Our arbitrary legal definition of blindness is a highly imperfect indicator of how blind people with remaining vision actually use their sight (13). The legal definition also fails to tell us how they perceive themselves. Society may categorize them as "blind" but not all of them so regard themselves. Indeed, according to John Cohen, the "denial of illness" was first identified in blind people and has even been given a name—Anton's syndrome (14). But the blind are not unique in this respect: the refusal to accept a "deviant" status has been observed in other visibly handicapped people as well (15).

To illustrate, we asked our respondents whether they considered themselves "blind"; *half* said that they did not (16). In other words, although all of them were "legally" blind and registered as such by their own states, not all were prepared to accept this categorization. Was this because, as noted earlier, many of them had some remaining vision and took "blindness" to mean total loss of sight? As might be expected, the less vision left to them the more likely they were to regard themselves as blind: nearly nine out of ten of the totally blind but only two in ten of those with reading vision accepted their "blind" status.

Their willingness to accept this status was also dependent on their age and on the age at which they began to lose their sight. On the whole, the older they were when they became blind and the older they were when we interviewed them, the less likely that they regarded themselves as blind—despite the fact that they had less remaining sight than the younger members of our sample. This in turn may have been due to their greater risk of experiencing other chronic ailments which also limit their movement and activity (17).

Precisely because they are so old, blind persons are more likely than



others in the population to suffer from chronic conditions or ailments besides loss of sight. In our sample nearly *two thirds* reported some other chronic condition (18). Of course, these ailments are not all equally disabling, but in varying degree they impose further limitations on activity and mobility. As might be expected, with advancing age the likelihood increases that blind adults will report such conditions. Thus while only 42 percent of those between the ages of 21 and 39 in our study reported other conditions, the figure for persons 40 to 59 was 61 percent, and for those 80 and over it was 75 percent!

Most commonly mentioned were arthritis or rheumatism, diabetes (a major cause of blindness), and heart conditions—in that order. But significant numbers of blind persons also report serious hearing difficulties. To illustrate, in one study of blind veterans 30 percent reported “hearing difficulties.” In another study of blind adults more than one quarter claimed that they were “deaf.” While these figures are all based on subjective reports and may lack clinical validity, I see little reason to doubt that the general physical health of many blind persons is poor indeed.

Their general health is also significantly related to their perception of themselves as blind and to at least one measure of their attitudes regarding blindness. Blind persons suffering from other chronic conditions were *less* likely to regard themselves as blind than those without such conditions. More than half (54 percent) of our respondents without other conditions said they considered themselves blind; but among those with at least one other ailment the proportion was 45 percent and in the group with two or more conditions the figure was only 39 percent. In short, the man who is blind and otherwise healthy is more likely to perceive himself as blind; while the blind person with a multiplicity of chronic conditions tends to lose his image of himself as blind.

Furthermore, when we correlated reported visual performance with general health, we found that the more vision remaining to them and the more additional chronic conditions they had, the less likely they were to regard themselves as blind. This relationship held up even when amount of vision was controlled by the presence of other conditions—that is, those without other conditions were more likely to perceive themselves as blind no matter how much vision remained to them. And when other conditions were controlled by vision, the more vision remaining to them the less likely that they considered themselves blind.



Curiously, however, the more chronic conditions they reported, the "higher" they ranked blindness as an impairment. Thus, when asked which one of five chronic conditions—deafness, cerebral palsy, paralysis, a missing arm or leg, and serious trouble with seeing—they regarded as "the most serious condition that a person can have," less than a third of our 684 blind respondents picked their own impairment; nearly equal proportions mentioned cerebral palsy or paralysis as the most serious of these conditions. Significantly, it was neither those with the least amount of vision nor persons with the most but rather those in the middle (that is, with motion perception) who were most likely to rank blindness as the greatest of these impairments. But while only one fifth of our respondents without other chronic ailments regarded blindness as the most serious condition, the proportion among those with two or more other chronic conditions was nearly twice as great.

Indeed, the proportion of those ranking blindness as the most serious of the five impairments was lowest for those without any useful vision and highest for those with useful vision who also had other conditions. But whatever their reported visual performance, the presence of other conditions appeared to increase their fear of blindness as an impairment.

What this suggests is that a blind man whose health is otherwise unimpaired considers loss of sight as less serious than does a man who suffers from blindness and other conditions as well. In other words, to the person who is "only" blind, loss of sight appears less frightening than to a person who is already suffering from other chronic ailments and for whom blindness on top of everything else would be a catastrophe.

Does this contradict our earlier finding that the multiply impaired were less likely to perceive themselves as blind? Not necessarily; there is apparently no connection between one's "rating" of blindness and one's degree of identification with the "blind." One may regard blindness as the most terrible of all impairments yet not wish to be identified as sightless (19).

## ACTIVITY AND MOBILITY LIMITATIONS

At this point I wish to turn to the problem of physical activity and mobility among the blind. In the preceding chapter I discussed this as a



problem for physically impaired persons in general. What about the blind? Except for the paralyzed, no impaired group in our society faces more severe restrictions on activity and mobility than the severely visually impaired (20). In this group, according to the National Health Survey, well over 60 percent of those 65 years and over faced some activity limitation (38 percent of them with a major limitation) while for those under 65 some 40 percent had activity limitations (19 percent with major restrictions). In other words, the older the person and the more severe his visual impairment, the greater the limitation on his activities. What this means for blind adults can easily be illustrated. In our study we asked respondents what kind of work they did around the house. As one would expect, women were far more likely to do housework than men. But the amount of housework performed varied even more significantly with age and with the presence of other chronic conditions. That is to say, with advancing age blind persons are likely to give up ordinary household tasks. However, those with other conditions or ailments were even less likely to be doing housework than persons coping "only" with blindness.

It should be noted, as the National Health Survey reveals, that visually impaired persons are more limited in activities, such as housework and employment, than in mobility. To illustrate, among the visually impaired of all ages with activity limitations, 58 percent also faced mobility limitations (21). When this figure is broken down, we find that 50 percent of them "have trouble getting around," 29 percent cannot get around alone, and 20 percent are confined to their homes. Among all visually impaired persons 65 and over, only 30 percent faced some mobility limitation, 6 percent with a major restriction (22).

In any case, among the legally blind mobility restrictions are keenly felt—more so even than poverty or the need for medical care. Just how critical is suggested by our own study. Asked by interviewers, "What would you say is the most important problem faced by a blind person?" nearly *half* of our respondents mentioned getting around, traveling, or falling down! Indeed, travel was mentioned nearly twice as often as the next most important problem to them—dependence. Why this is so is easy enough to explain: most blind people cannot travel unaided. Surprisingly enough, as many as a third of them do get around unaided; but the great majority need some kind of help. According to a study recently conducted for the Seeing Eye and limited to those most likely to



achieve some degree of mobility—that is, persons under 55—approximately one third rely on a sighted companion as their primary mode of travel, nearly one fifth use a cane, and only 6 percent use a guide dog (23). Actually, our own study of an older blind population shows greater reliance on canes and much less use of guide dogs.

As may be expected, the mode of travel selected by the blind person and his efficiency in getting about vary with such factors as degree of visual loss, age, and general physical conditions. Thus the more useful vision a blind person has—and it should be remembered that some blind people do have travel vision—the more likely that he will be able to travel unaided, especially if he has received training in mobility. However, even within the relatively vigorous age group studied by the Seeing Eye investigators, mobility declines with increasing age and with decreasing vision: the older the blind person and the less vision he has, the less frequently and extensively he gets about.

The Seeing Eye study reported that cane travelers perform better than blind persons relying on sighted companions, and that guide dog users do best of all. But few do well and most are dissatisfied with their travel performance. Perhaps the chief reason for this state of affairs is that very few blind people have ever received any mobility training worthy of the name. In our own study, only 15 percent reported that they had ever received any form of travel training. In other words, the majority had to fend for themselves.

The implications are plain enough. Many blind persons are old, suffer from other chronic conditions, and face serious difficulties in performing ordinary physical activities or in getting about. No wonder so many of them consider travel their most important problem. In a society such as ours, where numerous recreational pursuits require physical mobility, many blind people are immobilized.

### 3

## The Poverty of Blindness

As we have just seen, the frequent occurrence of blindness together with other infirmities of old age imposes multiple hardships on those who lose their sight. Moreover, in a work-oriented, materialistic society such as ours, leisure begins where work ends and leisure itself often means simply consuming things; hence a person's economic status critically affects his share of leisure. Let us look at the social and economic condition of blind adults—namely their level of education, opportunities for employment, income, and living arrangements.

### EDUCATION AND EMPLOYMENT

I shall begin with education. The United States Welfare Administration's study of nearly 100,000 recipients of Aid to the Blind (by definition an underprivileged group) showed a great discrepancy between the educational achievement of blind people and that of the general population. In 1962, 65 percent of all A/B recipients had less than eight years of schooling, compared with 10 percent in the American population as a whole. And whereas only 10 percent of A/B recipients had finished high school, in the total population the comparable figure was four times as high—40 percent (1).

A sample survey of blind New Yorkers 15 to 54, conducted in 1957 for The Seeing Eye, showed 37 percent with no more than a grammar school education and 13 percent with at least some college training (2). This distribution, however, was not very different from that reported for the state as a whole: in 1960, 38 percent of all New York-



ers 25 and over had only grammar school education, while 17 percent had received some college training.

Our own study of blind adults revealed considerable variation in years of schooling among the areas sampled, conforming to known regional differences in educational opportunity. For instance, the number of blind adults with some degree of college education in our North Carolina sample (8 percent) was only a third of the figure reported in Boston (25 percent) or in Portland, Oregon (29 percent). Actually, in Boston and Portland the proportion of blind adults with at least some college education was even higher than among the general population 25 and over; while in the other areas we studied (rural and urban North Carolina and Minneapolis) it was considerably lower. These findings permit no definitive statement about the educational achievement of blind persons.

But then for many of them education has a special connotation, particularly for those who have attended residential schools for the blind. Approximately half (52 percent) of our respondents blinded before the age of 20, or about one eighth of our total sample, had attended residential schools.

The level of education achieved by blind persons is a function of their greater relative age as well as the opportunities available in their communities; older Americans on the whole have fewer years of schooling to their credit than their juniors. As we shall see, blind persons who are most deprived educationally are also most likely to be disadvantaged with regard to opportunities for leisure pursuits.

What is the status of blind adults in the labor force? How many work? How many are idle? What kind of work do they do? How does blindness affect their careers? These are the questions I now wish to explore.

From the National Health Survey, conducted in 1957–58, we obtain a striking picture of the impact which visual impairment in general has on opportunities for work. According to that Survey, only 12 percent of the severely impaired were “usually working”; among the moderately impaired the proportion was 33 percent—or almost as great as in the total civilian noninstitutional population (35 percent). On the other hand, while 36 percent of the severely impaired—an elderly group—were retired, the figure for the moderately impaired was 19 percent and for the total population it was only 4 percent (3).

Among those categorized as legally blind, the figures on employ-

ment are equally shocking. A sizeable proportion have never worked in their lives; 16 percent of the men receiving Aid to the Blind had never found gainful employment (4). In the 1957 sample survey of blind New Yorkers between 15 and 54 which was conducted for The Seeing Eye, only one third were working part time or full time (5). In our own study of blind adults, 37 percent of all those under 65 were employed and 12 percent were looking for work. Among those in the most vigorous age group (20 to 39), 45 percent were employed and 17 percent were looking for work; but among those 65 and over, only 9 percent were working and only 3 percent said they were looking for a job. How does this compare with employment figures for the total population? In 1960, a year before we conducted our interviews, 63 percent of all Americans 20 through 64 and 19 percent of those 65 and over were employed.

In other words, whatever his age, a blind man's chance of finding work were—and no doubt still are—not much more than *half* as great as a sighted person's (6). But even this does not tell the whole tale. In our study only about half of all employed blind adults were working full time.

Opportunities for employment are also influenced by the region in which blind people live, their degree of blindness, and their education. Thus, although the five areas we studied differed only slightly with regard to the age distribution of their blind residents, we found that the proportion of employed blind adults ranged from a low of 17 percent in rural Johnston County, North Carolina, to a high of 33 percent in Minneapolis.

Our study revealed another curious finding. The "middle group" of blind adults—that is, those neither totally blind nor yet able to read with optical aids—had less chance of finding employment than groups at the opposite extremes of impairment. To illustrate, among blind persons without useful vision nearly 40 percent were either employed or looking for work, while among the group that reported ability to read print with glasses, over half were working or else looking for jobs. But the intermediate group—that is, those with more than light perception but less than reading vision—presented a different picture: only 18 percent were employed and only 6 percent of them were looking for work.

How can we explain this finding? One hypothesis is that blind persons in the middle range of visual acuity have greater difficulty in



adapting to their disability; this would certainly include their experience in trying to find work (7). Another possibility, which we shall explore later, is that those with the least amount of vision are most likely to receive help from social agencies—vocational and otherwise (8). As a matter of fact, approximately one fifth of our 684 respondents had received vocational or job training after losing their sight; and among those who had received such training more than half were employed.

For blind persons as for all Americans educational achievement is crucial in determining both the nature of and the chances for employment. Thus, our college graduates were far more likely to be employed than were our high school graduates (36 *vs.* 15 percent). Looking at it another way, college graduates—only 21 percent of our total sample of blind adults—represented 32 percent of all employed persons.

So far we have been dealing with gross statistics of employment and unemployment. But what of those who are working? Nearly a quarter of our respondents were employed at the time of our interviews with them. Within this group 59 percent were in nonmanual occupations (for example, professionals, managers and proprietors, clerical and sales workers, and vending stand operators), and 41 percent were in manual occupations (for example, operatives, craftsmen, household workers, and laborers). Interestingly enough, this distribution was approximately the same as that reported for the general American working population in 1960: 56 percent of all employed were in nonmanual occupations (9). In view of the fact that so many blind people of working age are barred from physically demanding manual occupations precisely because of their impairment, perhaps the most surprising thing that emerges from our data is the relatively large number who were in this category of employment. Only 15 percent of all those working were employed in sheltered workshops.

How does blindness affect choice of careers? Among persons in our study who were blinded after age 14, more than three quarters had been employed before losing their sight. Since some of them continued to work *after* losing their sight, we were able to measure the direct impact of blindness on their occupational histories.

Of some 88 individuals who had worked both before and after the onset of blindness, 42 had previously been in blue-collar or manual occupations and 34 in white-collar or nonmanual occupations (10). In the first group more than half moved into white-collar or nonmanual

occupations after becoming blind, the remainder staying in blue-collar fields. As for the second group, most of them retained their white-collar jobs after the onset of blindness; only five of them were “downwardly mobile”—that is, shifting from white-collar to blue-collar work after losing their sight. In other words, for blind persons with previous work experience, one effect of blindness was to help them shift from manual to nonmanual occupations.

Is this simply because blindness rules out so many blue-collar jobs? Apparently not, according to blind people now employed but with no prior work experience before losing their sight. For example, two thirds of our blind respondents with prior work experience were holding white-collar jobs; but only half of those who had worked only since becoming blind had achieved white-collar status. If the figures from these small groups mean anything, they suggest that if a man had worked before becoming blind his chances of performing nonmanual work were considerably higher than if his first job was as a blind worker. Why? To answer such questions, we need far more information than is presently available on the relationship between impairments such as blindness and careers.

So far as occupational status is concerned, even more important than age at onset of blindness is educational achievement. Among the college graduates in our sample, more than three fifths were in nonmanual occupations; but among those with no more than eight years of schooling, the proportion in white-collar work was less than one half.

Broad occupational categories tell us little about the kinds of work in which blind people find themselves. A vending stand operator may regard himself as a proprietor, but this scarcely makes the work more attractive. Whatever work blind people do, it is safe to say that relatively few have the chance to perform what Paul Goodman has called “man’s work”—that is, jobs “that are necessary or unquestionably useful; that require energy and draw on some of one’s best capacities; and that can be done keeping one’s honor and dignity” (11). Only half of those presently employed in our study said they were “very satisfied” with their jobs; 11 percent said they were not satisfied at all.

Unemployment and underemployment are thus typical of our blind citizens to a far greater degree than for the society as a whole; and future prospects seem uncertain. As our technology becomes more complex, demanding greater training, specialization, and expertise among



the employed, the pressure on marginal working groups such as the blind may grow to a point where artificial make-work becomes even more a way of life than it is already. To be sure, thousands of blind people are "rehabilitated" every year, but there is little evidence that they are being adequately prepared for meaningful work (12).

Does their precarious employment status give them greater opportunity for leisure pursuits? As we suggested earlier, enforced idleness is not particularly conducive to the more creative uses of free time; on the contrary, such idleness may rule out leisure. In our study a sizeable fraction of the unemployed were looking for work, suggesting that they would give up much of their "free" time if they could. On the other hand, as we shall see later, the employed in our sample tended to be the most active according to various measures of leisure behavior. Indeed, the harder they worked, the more energetic they were in making use of their time after work.

## INCOME AND LIVING ARRANGEMENTS

Whether or not they work and whatever their occupational status, most blind people are very poor, a characteristic they share with others who are disabled or physically impaired. Indeed, poverty characterizes persons who suffer from all degrees of visual impairment. National Health Survey data show that the prevalence of visual impairments among families with an annual income under \$2,000 is nearly *nine* times the rate found among families with an income of \$7,000 or more (13). Similar evidence comes from a 1963 study of visual impairment which the American Foundation for the Blind, in collaboration with Western Reserve University, conducted in Cleveland. It was found that while only 10 percent of all families in the city reported an annual income under \$2,000, the corresponding figure among households with a visually impaired family member was 36 percent. Furthermore, while 13 percent of all Cleveland families reported an income of more than \$10,000, only 2 percent of the households in our sample with a visually impaired family member claimed such affluence.

How explain this? Are the poor likely to suffer visual impairment, or are persons with visual impairments more likely to become poor? One plausible interpretation is that visual impairment, like other physical disabilities, tends to depress income because of its limiting effect on

employment. Besides, the visually impaired are disproportionately old and, as noted earlier, the aged themselves suffer much poverty.

Even more terrible is the poverty among the legally blind. Our own study provides ample evidence. Thus in the poorest of the five areas sampled (Johnston County, North Carolina) 42 percent of all families reported an income under \$2,000; among the blind in the county, however, the figure was twice as great (82 percent of those providing us with information about their income) (14). Even in the most prosperous of the areas we studied (Minneapolis), there was enormous disparity between the income of the total population and that of blind families: only 6 percent of all families in Minneapolis reported an income under \$2,000, but in our blind sample the figure was 35 percent. And at the other end of the income scale in Minneapolis, while 63 percent of all families claimed an income of \$6,000 or more, only 18 percent of our blind respondents reported themselves in this category (15). It is significant that among the five areas we studied, the relative income of blind persons was directly related to the general wealth—that is, the more prosperous the area, the better off its blind inhabitants. But few could be considered affluent by any standard.

Indeed, large numbers of blind people in the United States are literally wards of the state: approximately one quarter of them receive direct financial help under the federal-state program of Aid to the Blind. But as recently as December, 1964, the average monthly payment to blind recipients of public aid was only \$85.80; among the states the monthly payment ranged from a high of \$136.44 in Massachusetts to a low of \$44.79 in Mississippi (16). In our own study 62 percent said they were receiving some kind of financial assistance from public and private agencies (and half of these were getting Aid to the Blind); however, the proportion of indigent varied widely among the five areas (17).

In short, many blind persons are idle and most are poor, which means that many necessities of life are far beyond their means. Among those necessities is medical care, particularly for the aged blind who, as we saw earlier, must often cope with a multiplicity of chronic conditions and therefore find their medical expenses mounting sharply just as their incomes begin to drop. Many, therefore, join the ranks of the medically indigent and either go without adequate medical care or get treatment only with the help of social agencies. One third of all recip-



ients of Aid to the Blind also received medical care through their state public assistance agencies. In our own study an equal proportion had received medical care from public or private agencies; indeed, this was one of the most important services provided by these agencies (18). The most dramatic evidence that such care has been inadequate to meet the health care needs of such groups as the blind was provided by the campaign to secure passage of the 1965 amendments to the Social Security Act; these offer hope that at long last our elderly citizens, the handicapped, and the medically indigent of all ages will begin to receive the medical care they need (19).

As noted above in a broader context, poverty also means that many recreational pursuits are out of the question. Hence we can restate our earlier proposition: leisure and poverty are incompatible. To the physical handicap that blindness represents we may now add another: severe economic hardship (20). As one of our respondents said: "If [they] could make their own living, there would be lots of happy blind people."

We come finally to the living arrangements of blind persons. As one would expect, these are frequently determined by age; old people who have outlived their husbands, wives, or friends often face life alone. We noted earlier that between one fifth and one quarter of all Americans 65 and over live alone. Older blind people share this fate. Among recipients of Aid to the Blind, 18 percent live alone. In our own study, the figure was almost identical—16 percent. But while only 6 percent of our respondents under 40 lived by themselves, the figure for persons 80 and over was more than four times as great (26 percent); yet it is the elderly who are perhaps most in need of companionship and help in performing the ordinary tasks of daily life (21). For some of these blind citizens this means living in an institution (for example, a nursing home). In our study the proportion of institutionalized blind ranged from 1 percent in the 20-to-30 age group to 14 percent among those 80 and over (22).

I have stressed a number of characteristics of blind persons—many of whom turn out to be elderly and therefore multiply impaired, restricted in their activity and mobility, idle, and poor. In the following chapter I shall try to show how these characteristics determine the manner in which blind people use such leisure as is available to them.

## Activity and Isolation

### ACTIVE AND INACTIVE PEOPLE

Mrs. W. E. L., 55 years of age, has been blind for ten years. Divorced from her husband, Mrs. L. lives in a nursing home in a suburb of Boston; her only daughter (whom she never sees) resides in another town. In addition to her blindness Mrs. L. suffers from arthritis and diabetes, and she gets about only with the aid of a cane. However, she rarely leaves the nursing home, has no hobbies to occupy her, belongs to no clubs or organizations, and never visits with friends. Her chief "activity" is listening to the radio about eight hours a day. Is there anything else she would like to do? "I'd like to get out more to visit people," she says. To her the most difficult problem facing a blind person is "learning to get around and to do things like taking care of yourself, shopping, and visiting." She adds: "I keep trying to adjust myself to blindness. I would like to have some one come and talk to me about my fits of depression." But no one comes.

Mrs. J. P., of Portland, Oregon, is somewhat more fortunate. A widow in her 80s and blind for twenty years, at least she lives with her children. But Mrs. P. also sees few friends, belongs to no organizations, has no hobbies, and rarely leaves the house (and then only with the aid of a sighted person). Television and radio help to occupy her time, although, she says: "One day is the same as the next." As she puts it: the most serious problem for a blind person is that "they can't look after themselves. It bothers me that I can't take care of myself." Asked if she had any particular goals in life, Mrs. P. replied: "I haven't any. Nothing. I'm through."

The case of P. L., another Boston resident, is different. Now in his



late 60s, Mr. L. has been totally blind since he was a very small child. Educated in a local school for the blind, he has never worked in his life and is now completely dependent on a housekeeper. Like the two women described above, Mr. L. is unable to leave his house without a sighted companion; he belongs to no clubs or organizations, has no hobbies, sees no friends, and spends his waking hours chiefly listening to radio and TV. Is there anything more he would like to get out of life? His answer: "I have been blind since I was four years old and I never learned to do much. Housekeeper keeps telling me to learn to do something, but I don't know what I could do in my condition."

Here then are three inactive blind people. A good question is what they would do without radio and television. What would most of us do? (The average household use of television is five hours per day.)

On the other hand, some blind people are very busy. N. A., for example, is a man in his 50s who never married and lives with his mother in Portland, Oregon. Blinded in his early teens, he has no more than light perception; nevertheless, he gets about without help. And although he has never completed grammar school, he is now self-employed as a manager of a service station. Mr. A. belongs to a luncheon club and an investment group—both of which he attends regularly. More important to him, indeed his favorite activity, is visiting with friends—which he does nearly every day of the week. In addition he has two hobbies, operating a ham radio and playing the Hammond organ by ear. A man of affairs, Mr. A. says of his job as service station manager: "I enjoy it all day long. I get here at eight A.M., am here until seven P.M., and enjoy every minute of it—meeting people and discussing business." Are there any things he would like to do more often? "Oh, I can do anything I want right here. . . . We have meetings about business right here. I have houses that I rent and other things to do. I find myself feeling sorry for sighted people. . . . Well, of course, I'd like to play golf maybe. But I'm happy with what I can do. I'm busy all the time." One of the few things that displeases Mr. A. is having his name listed by the state agency for the blind. Why? "Because I'd rather not be considered different and don't want to participate in activities with blind people. I might start thinking differently and I don't want that."

C. G., also of Portland, Oregon, is another "active," although unemployed. Blinded as an infant (he still has no more than light per-

ception), Mr. G. is now in his 20s, unmarried, and lives with his parents. He attended the Oregon State School for the Blind and also had some college training. However, he has never been employed and never had a job. What then does he do with his time? He performs all the housework, repairs and fixes things; he goes shopping; he enjoys swimming, goes bowling, reads books, and leads a fairly active social life—seeing friends almost every day, going to movies, concerts, and lectures, and regularly attending meetings of the Oregon Council for the Blind (of which he is a member). As Mr. G. says: “People are pretty much my hobby, too.” To him, the greatest problem “is the misunderstanding that people think [the blind] are different. And I think communication and closer contact would break the misunderstanding.” In his own words, his goal in life is “learning who I am and how I relate to God and my fellow man.”

C. C., a resident of Minneapolis, and now in his early 60s, is also “in the midst of life” despite his age. Unable to finish grammar school and having lost his sight in his teens, until a few years ago he operated a nursing home which his son now manages. Recently, however, he organized a company to record popular music which he himself has written and which has been broadcast over the radio. He is the father of six children, all of whom completed college. Having had polio and a hernial rupture in addition to his blindness, Mr. C. experiences some difficulty in getting about even with a cane. Nevertheless, he does some housework and repairs things around the house; he belongs to and regularly attends meetings of the Kiwanis, Knights of Columbus, Third Order of Saint Francis, and the Holy Name Society. He also attends lectures and concerts and sees friends nearly every day. According to Mr. C., the greatest problem facing a blind person is acquiring self-confidence and “being accepted by his fellow sighted friends. . . . My feeling is if you have confidence you can always find a way out.” Asked about things he is unable to do because of his blindness, Mr. C. answered: “Well, before I lost my sight I wanted to become a hydroelectrical engineer. I’ve given that up. But if I had my sight, I would still want to do this. I would like to build things. I’ve built three houses in my lifetime.” If he had normal vision, Mr. C. said, “I would stop using a cane. And I would start looking at the pretty girls in the street.”



## LEISURE PREFERENCES

In an earlier chapter I briefly described some of the things that Americans in general do with their leisure. Now, in somewhat more detail, I hope to show how blind people spend the time on their hands.

What would they *like* to do? We gave our 684 respondents a choice and asked them which *one* of four things they would rather do—watch TV, listen to the radio, read a book, or visit with friends. Two fifths replied that they would prefer to visit with friends—considerably more than mentioned any of the other activities. Next was listening to the radio (chosen by more than one quarter), followed by reading (selected by nearly one fifth) and TV (the choice of only one tenth).

These preferences varied to some extent among the five areas we studied (for example, in Boston only 33 percent picked visiting with friends; but in Portland, Oregon, the proportion was 48 percent). They also varied when we controlled for age and education. Thus we found an inverse relationship between age and the desire to visit with friends: as age increased, the preference for visiting tended to drop. More than half of our respondents under 40 chose visiting—nearly twice the proportion among the octogenerians and nonogenerians in our sample. This, however, may have been due to the inescapable fact that older people have fewer surviving friends to visit. On the other hand, preference for radio listening tended to rise with increasing age—further evidence of the sedentary life of older people.

While age correlated imperfectly with blind adults' leisure preferences, educational achievement was more clearly reflected in their tastes, especially in the case of radio listening. For example, more than a third of those with a grammar school education chose radio as their favorite; among college graduates the proportion was barely a fifth. For blind persons as for others, education operates in expected ways in determining leisure preferences.

What people say they would like to do is not necessarily a reliable indicator of how they act; in our study, however, we found a fairly high correlation between expressed preference and behavior. Thus as we noted, two fifths chose visiting as their favorite recreational activity;

it turned out that 28 percent of them did in fact lead a busy social life (visiting with friends at least three times a week). Radio was preferred by 28 percent of our respondents; 25 percent of them were heavy listeners (at least four hours a day). Reading was the favorite of 18 percent; and an almost identical proportion—17 percent—were heavy readers (at least four books read during the previous month). TV was preferred by 10 percent; and an equal number described themselves as heavy viewers (at least four hours daily). While some may question our definitions of “heavy” visiting, listening, or reading, there is little doubt that these criteria are conservative, and the general correspondence between what people said they liked to do and what they actually did with their time is remarkable.

Are blind adults unique in their leisure preferences? An answer is provided by comparing our findings with a recent nationwide survey of Americans (designed to measure their experiences with and attitudes toward television); identical questions were put to blind and sighted persons alike (1). Asked what part of the day they enjoy particularly, most Americans mention the evening hours—further evidence perhaps of their alienation from work. What is it that makes evenings particularly enjoyable? The contrast between blind and sighted people is revealing. For the latter, the opportunity to relax after work is the most valued feature of evening hours—followed by watching television, spending time with one’s family, and getting “the kids out of the way.” But for blind adults, most of whom are not working, leisure has a somewhat different connotation. Thus radio and television occupy an even more important place in their day, as does visiting with friends (mentioned by nearly a quarter of our blind respondents but only 6 percent of the sighted cross section). Physical well-being in the leisure hours also was much more the concern of blind persons (mentioned by 22 percent) than of sighted people (only 6 percent).

These are some of the things that people say they enjoy when free. As we shall see later, blind persons miss certain activities precisely because of their impairment. Their expressed preferences, therefore, are colored by the physical as well as the social restrictions which blindness imposes on them. Leisure and what one does with it means one thing to an active, working population and something quite different to a physically and socially isolated group such as the blind.



## RADIO AND TELEVISION

Radio, which reached its peak of popularity for Americans during the thirties and forties and then declined as television began to saturate the country, has retained its appeal for blind persons. As we saw above, radio is the second most popular recreational activity—after visiting with friends. Nine out of ten blind adults in our sample listen to it, and a quarter of them listen *four hours or more on an average weekday*. Here, however, it should be noted that many people keep the radio on while they are doing something else; statistics on the time that blind adults spend with radio do not necessarily tell us how attentively they listen to it. Whatever the quality of their attention, however, radio occupies an important place in their daily lives.

Just how important can be determined from their stated listening preferences. Of course, what they listen to is determined largely by what is available; most radio stations broadcast an endless and monotonous number of “pop” tunes, although inhabitants of large cities (where we did most of our interviewing) are offered greater variety. In any case, our respondents listen to—and prefer—news, music, religious programs, sports events, and educational programs—in that order. Their appetite for news programs is hardly surprising if one remembers that most blind people are deprived of newspapers—unless someone else in their household reads to them. (As it turned out, only one fifth in our sample were regularly having newspapers read to them.) For blind persons radio is a major source of information about the world.

Another significant feature of radio listening among the blind is that most listen by themselves. More than two thirds of our respondents said that they usually listen alone. But only 16 percent actually live alone. Obviously, many blind people are left to their own devices by other householders, particularly during daylight hours. Radio helps to fill this void.

Listening patterns among our respondents varied chiefly with educational achievement and with degree of visual loss. Thus we found an inverse relationship between years of schooling and amount of radio listening: the higher the educational level, the lower the number of hours spent with radio. On the other hand, neither the age of our respondents nor the age at which they became blind made any appreciable difference as far as radio listening was concerned.



Radio by now is a fairly old feature of our mass-cultural landscape. Television, however, is a more recent phenomenon, and because of its visual content one is faced with a problem in describing blind persons' experiences with it. Thus, should one say that blind people "watch" TV (when in fact many of them cannot see it) or do they "listen" to it (in which case TV becomes for them merely a new form of radio broadcasting)? What are the rewards of TV for people who cannot see it (2)?

To begin with, while important to blind people, TV has yet to develop into the opiate that it has become for their sighted neighbors. As we saw earlier (Chapter 1), 90 percent of all American homes are equipped with TV sets; the average set is turned on between five and six hours daily and the average viewer spends almost as much time in front of the screen. Among blind people, however, the impact of TV has been less spectacular. To illustrate, in our sample only three quarters of the homes possessed television sets and only 70 percent of our respondents actually spend time with TV. Only 10 percent of them watch or listen four or more hours a day. This exposure is considerably less than in the case of radio; indeed, among the four types of recreational activity we asked our respondents to rank, TV was the least popular. Nevertheless, in view of the medium's appeal (at least in part) to the very sense that they have lost, it is surprising how much time blind adults do spend with it.

As compared with radio, TV for blind adults is more a source of entertainment than of information or inspiration. Their favorite programs—in order of popularity—are variety shows, mysteries, news broadcasts, drama, and music. Even so, news programs are valued much more highly by blind than by sighted viewers, according to comparable studies (3). Some 13 percent of our respondents picked news broadcasts as their favorite programs; among sighted viewers only 4 percent favor such programs. What the American television audience says it likes most is "action" programs (the favorite of 29 percent of all sighted viewers). Presumably this category includes westerns—that is, programs that are fairly low in verbal content—and it is hardly surprising that blind adults get little pleasure from such fare.

If TV involves certain frustrations for blind people, it has at least one major compensating feature—watching the set is a family activity for them as for most Americans, particularly during evening hours. In



this respect, their experience with TV differs sharply from radio listening. Three quarters of our respondents said they “usually” watch TV with other members of their families; but as noted earlier, less than a third listen to the radio with others present. In short, radio listening is a solitary activity; TV engages the family as a group—even if passively. Perhaps it is just this pattern of family viewing that gives TV its appeal for blind persons despite the visual barrier.

As might be expected, their interest in TV varies according to the degree of useful vision left them. Among those with no more than motion perception, only two thirds watch television; of those with reading vision, 86 percent look at TV. The time they spend with TV also varies with their degree of vision: only 19 percent of our respondents without useful vision watched TV at least two hours on an average weekday, but among those able to read the proportion was more than 40 percent.

Age was another determinant of blind persons’ interest in TV. With increasing age the proportion of nonviewers rose from only 12 percent among those in their 20s and 30s to 49 percent among those 80 and over. Nearly half of the younger age group looked at TV at least two hours daily; among the very aged the proportion was only 12 percent. Furthermore, the older they were when blindness struck them, the less likely they were to watch TV at all: 36 percent of those blinded at 60 or over did not watch, but only 18 percent of the congenitally blind in our sample were nonviewers.

Educational achievement apparently had some bearing on whether blind adults actually watch TV. For instance, about two thirds of our respondents with grammar school education looked at TV, while over three quarters of those with higher education watched it. On the other hand, among viewers, years of schooling made little difference in the number of hours spent with the set—a finding supported by studies of the general television audience.

Most American homes are equipped with radio and with television sets; and before concluding this section I must note the phenomenon of blind people who spend a considerable part of their day listening to both broadcast media (4). One third of our respondents spent between four and eight hours a day with radio *and* television; and one quarter of them were spending *eight hours or more* with the two media. This staggering amount of time represents at least a third of their



average weekday and approximately half of their waking hours. Curiously, the younger and presumably more vigorous blind persons in our sample were most likely to immerse themselves in radio and TV: nearly a third of our respondents in the 21-to-39 age group spent eight hours or more with the two media; the corresponding proportion among those 80 and over was only 14 percent. One plausible explanation of this phenomenon is that, at a time of life when most people are working, young blind persons have time on their hands. To help kill time, they need only turn a knob.

## SOCIAL LIFE

As we saw earlier, two out of five blind adults in our study said their favorite leisure activity was visiting with friends. We found that 60 percent of them actually did get together with friends at least once a week, and over a quarter of them reported three or more visits weekly. This is a surprisingly high proportion considering the age and mobility limitations of our respondents and the likelihood that as much visiting takes place outside as inside their homes (5).

Of course the amount of visiting declines with increasing age. Thus while nearly three quarters of those in the 21-to-39 age group visited friends at least once a week, the corresponding proportion among respondents 70 and over was only one half. So too the more useful vision left to them—meaning greater mobility—the more frequent their associations with friends: only half in the group with no more than light perception saw friends at least once a week, but among those with reading vision the proportion was more than two thirds. Despite their busy social life, nearly two thirds of those whose blindness began after age 13 or in adulthood told us that they visit friends *less* now than before their trouble with seeing began. It is also significant that blind adults living alone engaged in more visiting than those in family quarters. Among the former 40 percent saw friends three or more times a week; but among the latter group only 25 percent spent as much time with friends. But then family life for most people *is* social life.

Another finding worth reporting briefly is that among those who described their friends as also having “serious trouble seeing,” 54 percent perceived themselves as blind; but among respondents whose friends reportedly had no visual impairment the proportion was only



42 percent. What this confirms is the importance of group associations in determining one's acceptance of "blind" (or for that matter any other deviant) status: thus sightless people with blind friends are more likely to regard themselves as blind. A warning is necessary here: we had no way of determining just how seriously impaired our respondents' friends were.

What about their organizational life? Americans are supposed to be a nation of joiners, although recent studies have shown this to be far less true than many people believe. Indeed it is probable that half of all American citizens belong to no organizations whatsoever (6). In our study the proportion of joiners was approximately the same as reported for the general population: 56 percent (7).

Who joins? In the five areas sampled, the proportion of joiners ranged from a low of 21 percent in rural Johnston County, North Carolina, to a high of 71 percent in Portland, Oregon. In keeping with most other findings regarding the process of aging, we discovered that as age increased, joining decreased. Nevertheless, more than a quarter of those 80 and over belonged to clubs and organizations. Old age is often accompanied by other chronic ailments or conditions, as we have noted; and it is hardly surprising that more blind adults without any other conditions belonged to clubs than was the case among those with other ailments.

The joiners in our study also included a disproportionately large number of persons who had lost their sight early in life; one would expect organizations recruiting the blind to have greater appeal for persons who have attended residential schools than for those experiencing blindness late in life. Education correlates significantly with organizational life for blind persons as much as for their sighted neighbors: the more years of schooling, the greater the chance of joining clubs. In our study the proportion of joiners among those with at least some college education (61 percent) was nearly twice as great as the figure for persons with no more than a grammar school education (32 percent). Are employed persons too busy to join organizations? Our finding was that job-holders are much more likely to join than the unemployed. But then, as we saw earlier, those who are working tend to be much younger and therefore more active in general.

Perhaps most striking, blind people living alone were much less likely to join than those who live with others: among the former little more than a third belonged to clubs, but among the latter the proportion

was close to one half. But, as we saw earlier, persons living alone tended to visit more than those in family households. Apparently, they value the "primary" attachments of friendships more highly than impersonal, "secondary" associations with clubs and organizations.

So far we have been dealing with the simple fact of membership in clubs and organizations. These include churches and religious groups, lodges and other fraternal societies, as well as organizations for the blind. More important, such membership may be active or inactive. Among our joiners only six out of ten claimed that they regularly attended meetings or activities of their clubs. This figure provides a sharper picture of their organizational life and it suggests that only about a quarter of our respondents actively participate in clubs and organizations; the remainder are either unattached altogether or only nominally involved.

Visiting with friends and joining clubs together make up much of what we usually refer to as social life. To get a more rounded picture, we devised a simple index combining the two activities—visiting with friends and participating in clubs or organizations. This composite yields a crude measure of active participation at one extreme and social isolation at the other. We found that one fifth of our respondents were quite active—that is, visiting with friends at least once a week and attending club meetings at least "once in a while." At the other extreme, about one fourth were socially isolated: they visited with friends no more than two or three times a month and participated in no organizational activities whatever (8).

The active people in our sample tended to be younger, healthier, and higher in educational achievement; they also were more likely to be working. The isolates, on the other hand, were disproportionately old—nearly two thirds were 65 or over. They were also more likely than the average blind adult in our study to have experienced blindness late in life—close to half of them lost their vision when 60 or older. Because of their age, they were much less likely to be employed than our average respondent—only 12 percent were working. Isolates were educationally deprived: three fifths had gone no further than grammar school (in our sample as a whole the proportion was about half). That blindness itself is an isolating factor in their lives may be seen from the fact that the most isolated persons visit friends less now than before their visual impairment began. Moreover, their desire for friend-



ship was apparently weaker: while 41 percent of the sample selected visiting with friends as their favorite leisure activity, the proportion among the isolates was only 29 percent.

Isolation and being alone are not necessarily synonymous: as a matter of fact, we found that blind adults living alone were only slightly more isolated than those living with others. Nevertheless, many blind people lead truly lonely lives: more than a third of our respondents had no relatives living in their communities. And although a third said they preferred to do things alone, this may be an enforced attitude because they *are* alone much of the time. In this connection, we found that the most isolated among them were nearly twice as likely to prefer doing things alone than those who were leading active social and organizational lives. Clearly this isolated group among the blind needs some kind of help that will provide them with the social attachments they are missing. Few choose an isolated life; many, however—especially in old age—have it thrust upon them (9).

Our tendency to stigmatize the blind as well as other visibly handicapped people is a major factor in their social isolation (10). Some are keenly aware of this process. Thus, Mr. L. S. of the Boston area, formerly a well-known vaudeville performer but then in his late 70s and totally blind, said: "No one can understand blindness until it happens to them. There is a stigma attached to it, believe me." Miss B. L. P. of Portland, Oregon, also thought that there was a kind of "curse" on blindness. "People cringe when they see a blind person," she said. "They want to quick get away from that person. I think it's because people are afraid to accept [him] on an equal basis." Mr. W. F. D., still another Bostonian, then in his 50s and blinded in battle in World War II, said: "Some people think blindness might rub off on them. They don't want to have anything to do with you." Mr. C. J. A., of Charlotte, North Carolina (his wife was also blind) said: "Blind people feel set aside and out of things. I have noticed that colored people are more apt to help blind people than white folks. Maybe it's because they also feel set aside." (Mr. A. was a white man.)

## OTHER MEASURES OF ACTIVITY

Evidence from our study shows that blind adults are culturally as well as socially isolated. Thus while radio and television in the home

have considerable appeal for them, movies outside the home do not attract them in large number. Less than a fifth of our respondents had gone out to the movies during the twelve months prior to our interviews with them. To be sure, movie-going has generally declined in the age of television; but blind people see far fewer films than their sighted neighbors. Why this is so is easy enough to understand: the problem of getting "input" from an essentially visual medium is compounded by the difficulties many blind persons face in leaving their households for recreational or any other activities. Thus it is hardly surprising that movie-going drops sharply with increasing age.

Similarly, within the twelve months before our interviews with them only 16 percent of our respondents had gone out to any musical concerts, although this varied according to the opportunities available in their communities. A few more than half had attended church services during the previous month; again, however, there was considerable variation by area—only 44 percent had gone to church in Portland, Oregon, but the proportion in Minneapolis was 70 percent (11). Fewer than half reported hobbies of any kind; interestingly enough, however, outdoor activities (for example, gardening) were most popular.

Voting is another activity that is often studied as a measure of social activity. We discovered that the proportion of our respondents who had voted in the 1960 Presidential election—59 percent—was not much lower than in the general population—64 percent. And as in the country as a whole, voting rates varied among the five areas we studied, ranging from a low of 32 percent of the blind adults in rural Johnston County, North Carolina (where only 48 percent of all eligible adults had voted) to a high of 73 percent in Minneapolis (where 76 percent of all eligible adults had voted). So, too, voting figures differed according to educational achievement: while more than 80 percent of our respondents with a college education had voted in the 1960 Presidential election, the corresponding proportion among those with a grammar school education was only half as much—40 percent. Blind men were also more likely to have voted than blind women. And, as one might expect, voting rates increased in direct proportion to the degree of interest in politics: among blind adults who described themselves as "very interested" in political or world affairs, more than two thirds had voted in the 1960 Presidential election; but among those who said they were "not at all interested" only one fifth had cast their ballots. Voting in Presidential elections is per-



haps the minimum exercise of citizenship; considering their age and mobility limitations, however, blind people are doing nearly as well as their sighted neighbors (12).

Activities such as visiting with friends, joining organizations, and voting, taken alone, provide only a partial picture of the extent to which blind persons are engaged in social life. For an additional, more refined measure we constructed a weighted index of *social activities*—including employment, length of work week, shopping, visiting friends, membership in clubs or organizations, and attending church (13). We found that while more than a fifth of them scored high in these activities, an equal proportion scored very low. How did the two groups—active and inactive—differ?

First, since we are dealing here with activities that require some mobility, it is hardly surprising that the two groups varied in their physical characteristics. Thus, one third of our respondents aged 21 to 39 scored high on the social activity index, but among those 70 and older the proportion was only half as large. Conversely, less than 5 percent of the younger blind adults scored low on the index, while among the very old ones the proportion was more than one fifth. So, too, the more useful vision left to the blind adult, the higher his score on our activity index. As might be expected, those suffering from other chronic conditions tended to be inactive. Blind adults who traveled chiefly with the help of sighted companions scored lower than those who used a cane or got about without any aid. And men scored considerably higher on the activity index than women.

Apart from physical characteristics, active and inactive blind people varied most significantly according to educational achievement and living arrangements. For example, nearly a third of our college-trained respondents scored high on the social activity index; but among those who had gone no farther than grammar school the proportion was only about half as great. Conversely, only 6 percent of the college graduates and more than 20 percent of the grammar school graduates scored low on the scale. In other words, the higher their educational level, the more likely they were to engage in social activities.

It can be argued that our index of social activities (most of them requiring a certain degree of mobility) discriminates against elderly persons in our study, particularly those suffering from other chronic

conditions. After all, many of them are physically unable to leave their homes, however strong their desire for social life. To allow for this possibility and to further round out our picture of their behavior, we devised a weighted index of the more *sedentary activities*—including listening to the radio, watching TV, reading books, going to the movies, and hobbies (14). Our general results were almost identical to those we had obtained from the first index. That is, we found that while nearly one fifth of our respondents scored high in these activities, an almost identical proportion scored very low. Put otherwise, this meant that while a fairly small group of our respondents found much to occupy themselves (chiefly at home), an equally small group was idle. One might expect older blind adults to score higher on this measure of sedentary activities. In fact, however, we found that the younger they were, the more likely that they pursued such interests: nearly a third of the younger age group but less than a fifth of those 70 and over scored high on the index. Conversely, only 5 percent of our younger respondents scored low on this index while among the older age group the proportion was five times as great. Education also was a factor in determining the level of sedentary activities. Thus, 26 percent of the grammar school graduates in our sample scored low on this index while only 8 percent of the college graduates were at the bottom. On the other hand, only 10 percent of the grammar school graduates and 25 percent of the college graduates scored high on the index.

Do blind adults who pursue sedentary interests avoid the more physically demanding social activities? In view of the mobility problem, one might expect the high scorers on one index to be low scorers on the other. We tested this hypothesis and to our surprise found that those who scored high on our index of sedentary activities also were more likely to score high on the index of social activities. In short, blind persons who were active in one dimension of behavior were also active in the other.

This conclusion is supported by the results of putting the two activity indexes together to produce a *composite* of all major forms of work and leisure behavior (15). Nearly 17 percent of our respondents scored high on this combined index of activities; a slightly larger proportion—21 percent—scored low. As before, we found that the most active people tended to be youthful and higher in educational



achievement. About the high scorers little more need be said: they are exploiting to the maximum the opportunities their communities offer for social life, organizational activities, and cultural pursuits.

But what about the low scorers? They are blind people who range from complete inactivity to a bare minimum of social and other leisure pursuits; in short, they are out of it. Who are they? To begin with, they are disproportionately old—nearly three quarters are 65 or over. They are more likely than the average blind adult in our study to have suffered blindness late in life: half lost their sight at age 60 or over. They are more heavily burdened with other chronic conditions; three quarters of the low scorers on our combined index of activities reported such conditions (as against less than two thirds of our total sample). They are less mobile and more likely to rely on sighted guides when they leave their homes. They are educationally underprivileged and because of their age they are far less likely to be working. Although they do not live alone in any greater number, they are more likely to prefer to do things alone. Nearly half of them were widowed. Approximately two thirds were women. Relatively few were interested in political and world affairs and only 38 percent had voted in the 1960 Presidential election (the proportion in the sample as a whole was 58 percent).

The cold statistics of inactivity and isolation cannot begin to convey the nature of their detachment from the social and cultural life of their communities. Here, without doubt, is one of the most serious challenges which they—and those who would help them—face.

The extent of blind adults' deprivation is indicated by their own statements. When asked what things they would like to do more often, our respondents mentioned outdoor activities, traveling, social life, crafts and hobbies, and organized functions or activities—in that order. As might be expected, the older they were and the more severe their visual loss, the less they missed activities requiring that they leave their homes. Curiously enough, persons scoring high on our index of social activities were almost as likely as low scorers to say they missed social and club life. But those scoring high on our index of sedentary activities were far more likely than low scorers to express a wish for more intensive social and group functions. So, too, persons scoring high on our combined index of activities tended more than the low scorers to miss a wide range of interests. In other words, the most active blind adults wanted

*more* things to do to occupy their time. The converse is also true: the inactive, disengaged people in our study, while by no means satisfied with their fate, were less inclined to miss the active life. Whether this was due to inertia, to a kind of "combat fatigue" which blindness and old age entail, or to lack of stimulation—we cannot say. Very much out of things, a substantial minority of blind adults evidently have little desire to become involved.

Perhaps the most surprising thing that emerges from our data is not the relative isolation or disengagement of the blind but the extent to which many of them *do* participate in social and community activities and find things to do at home that give some pleasure. To be sure, all activities decline with increasing age and the burden of additional chronic conditions; but even among the very elderly we found a significant fraction who score high on all activity measures. Considering the physical and social obstacles, this is no mean feat.





## 5

# Reading

One of the consequences of their relative isolation and inactivity is heavy reliance of blind adults on indirect means of communication—which includes the spoken or printed word as well as radio and television. “If I had normal vision, I wouldn’t read nearly as many books,” says the Reverend H. G. G., of Portland, Oregon, one of our respondents. Now in his 80s and legally blind for nearly ten years (he can see objects but not ordinary print), the minister reads more than four talking books every month. The amazing thing is that some blind people read so much. Special efforts to provide the blind with reading services (unmatched in any other area of leisure activity or for any other handicapped group) are why books have become so important to them. Nevertheless, many blind persons do not read and much remains to be done to help them—particularly the aged—to fill the many solitary, idle hours of their declining years. In this chapter I shall describe the characteristics and experiences of blind readers and of nonreaders.

### WHO READS?

Aside from students, most Americans do not read books; if they have any leisure they prefer to spend it in other ways, as we have seen (1). Although blind people face serious obstacles in gaining access to the written word, they also have unusual opportunities to so do. But—and this is especially true of the great majority who suffer loss of sight in adult life—their capacity and desire to read are influenced by the culture of which they are a part.



Thus when given a choice between TV, radio, visiting with friends, and reading, only one fifth of our respondents picked reading as their favorite leisure activity. Indeed it was third in popularity, after visiting and radio. Among the five areas we studied, there was considerable variation in the preference for reading: in Charlotte only 8 percent of our respondents picked reading, while in Portland the proportion amounted to 24 percent. This no doubt reflected sharp regional differences in educational achievement. While only 12 percent of all the grammar school graduates in our five areas picked reading as their favorite among the four activities, the proportion among college graduates was 28 percent. However, the relationship between age and taste for reading was not what we might have expected. Relatively few (only 10 percent) of our younger respondents chose reading as their favorite. But then the proportion rose to 25 percent among blind persons in their 40s and 50s, declined to half that for respondents in their 60s, and then increased again (to more than 20 percent) among the very elderly—those 70 and older. One possible explanation, which we shall explore later, is that taste for reading is closely related to reading experiences before the onset of blindness.

Whatever their reasons, only a minority have any passion for reading. Less than a third of our respondents considered it “very important” to read the great classics of the past or to keep up with current books.

Just how many do read books? It should be noted that we defined “readers” as those who said they had read at least one book either in whole or in part during the previous month. (Newspaper and magazine reading was treated separately.) Data from our study show wide area variation in the number of blind readers. We found that the proportion of readers ranged from a low of 33 percent of our sample in Charlotte to a high of 60 percent in Portland (2). Similarly, the number of “heavy” readers (defined as those who had read four or more books during the previous month) ranged from a low of 7 percent in Charlotte to a high of 30 percent in Portland. Taking the five areas together, more than half those surveyed were book readers—of whom about one third were heavy readers. Since we are dealing here with separate samples drawn from four state registers and not with a nationwide cross section of the total blind population, no projections should be made from our figures. The Library of Congress, which produces and distributes most of the reading matter available to the

blind through a network of special regional libraries, estimates that about a quarter of the total estimated blind population are being reached by its program (3).

Nor can we easily compare blind readers with their sighted neighbors. Mode of reading (4) differs radically, as does the distribution of reading matter. While sighted persons can obtain many books from shops and libraries in their own communities and neighborhoods, blind readers depend largely on a regional library system which can produce only a small sampling of the titles in ordinary print and must distribute them by mail. A number of studies indicate that not much more than a quarter of the sighted population read books; this figure is considerably smaller than in our study but approximately the same as the proportion of blind people being reached by the Library of Congress.

Caution must also be exercised in comparing the amount of reading between sighted and blind persons. Thus, in one national survey of the general population, only 8 percent reported that they read four or more books in the previous month. But, as noted, the proportion in our study was approximately twice as great.

If these figures seem surprising, it must be noted that we defined the process of reading to include not only braille and records from all sources, private as well as public, but ordinary print (in our study 14 percent of our respondents claimed to have reading vision) and the use of sighted readers. This broad definition gave us a higher proportion of readers than we would have obtained if we had limited ourselves to those receiving braille and records from regional libraries—the basis for Library of Congress estimates. Indeed, when we asked about their primary mode of reading, we found that while more than half of our readers used records, the next largest group (more than one fourth) read with the help of sighted readers. More striking still, the proportion who read ordinary ink print (9 percent) was approximately the same as the number who read braille (8 percent).

In short, while the evidence is not conclusive, our data suggest a fairly heavy amount of reading among blind adults, particularly when the process of reading is defined to include indirect as well as direct access to the printed and spoken word.

What characteristics are associated with reading? To begin with, our study suggests that reading by blind persons reaches a peak in early adulthood (21 to 39), declines sharply in middle age (40 to



59), and then—surprisingly—rises to a plateau in old age (60 and over). This contrasts with what we know about Americans in general, since, according to some (but not all) studies, their reading tends to decline with increasing age. The reasons for this trend are not entirely clear. One hypothesis is that the younger group includes some persons still in school—heavy readers by definition.

Another possible explanation is that most elderly blind persons suffered loss of sight in old age, and some of them had presumably formed lasting reading habits while they had sight. Thus, chronological age made considerable difference as far as amount of reading was concerned; so too did the age at which blindness occurred: only 14 percent of those who lost their sight before age 14 were heavy readers, but among those blinded at age 60 or over the proportion was 22 percent. We observed a direct relationship between reading experiences before the onset of blindness and present reading patterns. Only a quarter of those blinded after age 13 (5) and who had not previously read books or magazines in ordinary print were presently reading books; the corresponding proportion among persons who *had* previously read books or magazines was approximately one half. Similarly, while little more than a third of those blinded after age 13 who had not previously used the public library were presently reading books, the proportion among those who *had* previously used the library was more than one half.

Past reading experiences were therefore extremely significant in determining whether blind adults might read books. These experiences were also important in determining how much they read—that is, if they had read books before blindness struck them, they were much more likely to be heavy readers. On the other hand, the amount of vision left to them made little difference in their reading: those without useful vision were just as likely to be reading books and to be heavy readers as those who had enough vision remaining to read ordinary print with optical aids.

As might be expected, educational achievement was another important clue to reading behavior. While barely more than a third of our respondents with grammar school education were presently reading books, the corresponding proportion among persons with at least some college training was three fifths. Education also influenced the amount of their reading: only 12 percent of the grammar school graduates

were heavy readers, but among our college graduates the proportion rose to 26 percent. Education and income are, of course, closely related socioeconomic characteristics. In our study only a third of all respondents with less than \$1,000 in annual income were book readers and (only 11 percent heavy readers), but among those with an annual income of \$4,000 or more, the proportion of readers was three fifths (with 17 percent reading four or more books a month).

No less important an influence on present reading patterns is the relative interest which parents and other family members take in books. Among our respondents with nonreading or light-reading parents, less than a third presently read books (only 10 percent read heavily); but among those whose parents were heavy readers, the proportion of readers was nearly three fifths (and 23 percent of them were heavy readers). The influence of other family members' reading interests was equally great (6). Among blind adults whose other kinfolk were nonreaders or light readers, only about two fifths presently read (and only 11 percent of them heavily), but among those whose relatives were reported to be heavy readers, the proportion of book readers was nearly two thirds (23 percent reading at least four books a month).

## MODE OF READING

As noted earlier, more readers (53 percent) rely on records than on all other techniques put together. However, there was some variation among the areas studied: in Portland, for example, more than two thirds of our blind readers depended primarily on records. On the other hand, in rural Johnston County only one quarter used records while nearly half relied on sighted readers.

Amount of reading varies significantly according to the technique used: more than half of those who relied primarily on records but less than one tenth of the persons depending on sighted readers had read four or more books in the previous month.

Use of any particular reading mode is influenced by many factors. Thus, we found that 54 percent of our respondents without useful vision (that is, no more than light perception) depended on records. Among those with motion and object perception the proportion of



record users rose to 62 percent. But in the group with reading vision only 28 percent were relying on records; 42 percent of this group said they did most of their reading in ordinary print. On the other hand, the more vision left to them, the less likely they were to use braille as a primary mode of reading.

Age also figured significantly in the choice of reading methods. While little more than a third of our respondents in the 21-to-39 age group relied on records and approximately one fifth used braille, in the 70-to-79 age group nearly two thirds depended on records and only 3 percent used braille. This, of course, is closely related to important differences in reading experiences according to the age at onset of blindness. Most braille readers learn the technique early in life. In our study, among persons who had lost their sight before the age of 15, one fifth depended on braille and two fifths on records; but among those who became blind at age 60 or above, two thirds relied on records and only 1 percent on braille. Mode of reading is also determined by one's general state of health, braille in particular requiring considerably more digital dexterity than the operation of a talking book machine. Two thirds of our record users reported some other chronic conditions. Among braille readers the proportion was well under one half. More than half of our braille readers had attended residential schools for the blind; however, only one eighth of our record users had gone to such schools.

Not only do readers vary according to the technique they use (many, of course, use more than one method), they often abandon one mode for another or give up reading altogether. This is especially but not only true of braille readers. To illustrate, half of our respondents who were not presently getting records had once used them in the past. More striking, although approximately one fourth of our respondents claimed that they were able to read braille, little more than a quarter of this smaller group were actually using it. Two fifths of those able to handle braille were not reading books in any form, and more than 30 percent were relying on some other technique. Such figures reflect the technological revolution in reading which was brought about by the development of the long-playing record. They also support the hypothesis that there has been a steady drop in the number of actual braille readers as blindness has increasingly become

a phenomenon of old age. The trend is definitely toward the use of recorded materials, including tapes.

Are readers satisfied with the services being provided them? Few are reading as much as they would like to. Even among our heavy readers, a quarter said they were reading fewer books than they would like to; as for light readers, the corresponding figure was one half (7). Nearly 30 percent of the record users said they were getting fewer books than they would like to, but among braille readers the proportion was 50 percent, and among those relying on sighted readers it was 53 percent. It is also clear that for many who become blind in adult life and presumably had read ordinary print prior to their loss of sight, visual impairment leads to a decline in reading. In our study more than half of those whose blindness began after age 30 reported that they were now reading less than before their trouble with seeing began. This is not the whole picture. Indeed, some blind people are reading more now than when they had sight.

On the whole, most blind readers are satisfied with the work being done by their regional libraries. Some are quite enthusiastic (8). One of our respondents, Mr. G., of Portland, said: "I'm so grateful for the talking books, I think they are a perfectly wonderful service for the handicapped. I think they have literally saved my life." And another respondent, Mrs. G., of Minneapolis, a housewife in her fifties, said: "I surely appreciate things that have been done [by the regional library]. Dollars and cents could never pay what I have received in pleasure. I mean in receiving the books. I just can't explain how they bring the world to me. It is priceless. I couldn't afford it—never. I'd be limited in my reading that I love so much. I want to thank them for sending the records." Such expressions of gratitude were common. Only 3 percent of the readers in our study expressed general dissatisfaction with the library services available to them.

Relatively few—only 15 percent of all readers in our study—reported any difficulties in receiving and returning books or records through the mail (9). Some, however, did complain about the condition of braille books sent them or about the problem of coping with heavy containers. Only one quarter of our readers said that there were ways in which regional library services could be improved. They suggested particularly that libraries make more books available, simplify



the mechanics of ordering and shipping them, and improve the condition of books.

Although they have relatively little voice in the over-all selection of books, most blind readers also appear to be satisfied with the books chosen for publication by the Library of Congress (10). Incidentally, their favorite books are the Bible (the choice of one fifth of our readers), biography, historical fiction, general fiction, and other religious books—in that order. Heavy readers were most likely to ask that additional titles be made available; 40 percent of them said there were books they would like to read that are not presently available in records or in braille. Among light readers, the proportion was only 20 percent.

Blind readers have been using braille for more than one hundred years and talking records for about a third of that time. But new revolutions in reading devices are on the horizon, if not already upon us. At the time of the study (1961), the Library of Congress had recently introduced 16 $\frac{2}{3}$  rpm talking book records, but they were not then available. (Since then more changes have occurred, with the first use of 8 $\frac{1}{3}$  rpm records occurring in January, 1968.) Nevertheless, we tried to determine how blind readers might greet such innovations as a longer-playing record or multitracked tape recording (11). Respondents' acceptance of such devices varied according to the number of books they were reading and the technique used. Thus half of the heavy readers and only one third of the light readers in our study said they were very interested in getting longer-playing records, and interest in tape recordings varied similarly. As might be expected, blind readers using (the now old-fashioned) 33 $\frac{1}{3}$  rpm talking book records were particularly receptive to the idea of longer-playing discs. More than half said they were very interested in such devices. But half of our braille readers said they were not interested at all. Interest in tapes also varied according to the present mode of reading; record users were much more enthusiastic about tapes than braille readers.

Great strides have been made in providing blind people with reading materials and services, but it is still just a beginning and there is scarcely room for complacency. Much remains to be done to satisfy those who are presently reading books (12). More important, what about the many persons who read nothing? Who are they? With re-

gard to many personal or physical characteristics, such as age, degree of vision, health, and so forth, they are not very different from the average in our sample. In other respects, however, nonreaders are quite different. As might be expected, their educational level is lower than the average; they are also somewhat poorer. Perhaps most striking, they are less likely to join clubs and organizations, to have voted, to attend church, to take part in the whole range of activities that might bring them into closer contact with their neighbors. Reading may be a solitary activity for most people—blind and sighted—but it need not result in isolation from the community. On the contrary, the behavior of heavy readers in our study suggests that they are least likely to be detached from community life (13).

This, however, may be a coincidence. Readers are not made by community organizations. In any case, large numbers of blind people have never had any reading experiences. In every sense of the word they represent an untapped market for the production and distribution of reading materials.





## 6

# Getting Help

Old, immobile, poor, dependent, inactive—such in brief is the fate of many blind citizens in a society that worships youth, mobility, wealth, independence, and activity for its own sake. This is the darker side of blindness. Not all, of course, fit this description. I have tried to show that some blind persons are as busily engaged at work and/or the pursuit of leisure as any of their sighted contemporaries; insofar as there can be successful “adjustment” to the impairment, they have made it. But many, less fortunate, find themselves cut off from the economic, social, and cultural life around them. They need help. What is being done about them?

At first glance, a great deal—blind people being perhaps the most effectively organized of any handicapped group and among the earliest if by no means the prime beneficiaries of our version of the welfare state. A unique and elaborate network of several hundred social agencies (public and private) seeks to provide them with help and services, including tax exemptions, direct financial assistance, vocational training and placement, special education, mobility aids, travel concessions (1), and reading materials. Altogether we spend several hundred million dollars every year to help those who have lost their sight; this does not include our considerable investment in measures designed to prevent blindness. These programs are dedicated in principle to the goal of integrating blind people in the life of their communities, or at least reducing the burden their condition imposes on them. How successful is this effort? Who among the blind get help? What needs remain to be satisfied? The purpose of this chapter is to answer such questions. To begin with, let us see how blind people themselves appraise their problems and needs.



## WORRIES AND PROBLEMS

According to a nationwide survey of persons 21 and over, conducted by the University of Michigan's Survey Research Center, Americans worry most about economic and material problems (the major worry of 41 percent), family health, children, political problems, and their own health—in that order (2). Our own study showed that, except for concern about political problems, blind people are very much like their sighted neighbors—that is, they worry about money problems (mentioned by 33 percent), the health and welfare of their children and other family members, and their own health—in that order. Unlike most of their neighbors, however, our respondents had special reasons for expressing anxiety about the helplessness and dependency that blindness entails for them. And the older they were, the greater their tendency to worry about their health and their dependence on others. As one said: "The biggest calamity in not being able to see is having to get someone to depend upon, at all times, for all things."

Another, and more surprising, finding of the Survey Research Center Study was that while older Americans describe themselves as less "happy," they also tend to worry less in general and less about economic and material problems in particular. Our own study confirmed this: while only 5 percent of the younger age group in our sample (those 21 to 39) said they never worried, the proportion of non-worriers among those 70 and over was 17 percent. Furthermore, although old age is so often associated with poverty, our elderly respondents were much less likely to mention financial problems than the younger men and women in our sample.

To explain this decline of money worries with increasing age, the authors of the Michigan study suggest that "for many older people economic insecurity may be less of a conscious problem than one might have imagined. With lower needs and aspirations in the material area, and living in an age where minimum security is guaranteed for most, their economic concerns apparently become less paramount" (3). An alternative explanation, I feel, is that old people are simply more apathetic and resigned about their problems. Or, as one of our respondents said: "I worry about just living. What has a blind person to look forward to."

How do they perceive their problems? In our interviews we ap-

proached this subject in a number of ways. To begin with, we asked respondents: "What would you say is the most important problem faced by a blind person?" This "projective" question was intended to relieve them of any anxieties or embarrassment that might have been aroused by a direct probe into their own experiences; at the same time we hoped that their answers would tell us something about their personal reactions to blindness.

As we saw earlier (in Chapter 2), blind people regard immobility as their most important problem: nearly half of our respondents mentioned difficulties in getting around, traveling, or "falling down." Indeed, travel was mentioned nearly twice as often as the next most important problem—dependence on others. Following this in order of importance were "adjusting" to blindness, money worries, problems associated with work and getting a job, social isolation, and coping with the attitudes of sighted people (4). In short, the things that most bother blind people are precisely those manifestations of sightlessness which in one way or another limit their participation in community life: immobility, isolation, dependency.

It would be unfair to leave the impression that blind people think only about physical and material things; they are no more or less motivated by self-interest than their sighted neighbors. Thus, when asked about their "most important goal in life," one quarter of the persons in our study replied that they hoped to lead a "good, Christian life" and 14 percent said they would like to be of "service to others." Such at least were their stated intentions. Perhaps as a reflection of our more rural, religious, and morally imperative past, the elderly men and women in our sample (70 and over) were much more likely to mention the "Christian life" than younger people (21 to 39). So, too, the greater their age, the more frequently they mentioned "service to others" as a goal in life.

No less important, however, was the desire to raise a family—mentioned by one quarter of our respondents—although this declined with increasing age. As might be expected, the desire for a job also dropped sharply with increasing age. While "good health" was mentioned as a goal by 12 percent of our respondents (and particularly by the aged), the hope of having their vision restored was the dream of only 8 percent. More important to them was "peace of mind"—the goal of 14 percent (5).



This brief catalogue of worries, problems, and goals provides the background against which we can examine the help that blind adults get and need. Immobility, financial insecurity, poor health—these are their major concerns. If, despite their relative inactivity, few said anything about the lack of opportunity for leisure or recreational activities, we need not conclude that these pursuits have no importance for blind people. Rather, it is more likely that blind people, as their sighted neighbors, regard material and physical well-being as essential for the enjoyment of such pursuits. Let us now see how their basic needs are satisfied by social agencies.

### THE HELP THEY GET

As noted earlier, blind citizens are served by a variety of institutions ranging from agencies of the federal government with nationwide responsibilities at one extreme to local organizations with small budgets, staffs, and caseloads at the other. In between is interposed a network of state agencies which differ in structure and sometimes in function as well. Thus, blind residents of the five areas we studied—Boston, Charlotte and Johnston County in North Carolina, Minneapolis, and Portland, Oregon—are entitled to various forms of help provided by state agencies established for such purposes (6). These services include financial assistance, special educational facilities, vocational rehabilitation, jobs in workshops, home teaching, optical aids, travel training, organized recreation, and other social services. Each of the areas is also served by a regional library which distributes braille books and records to blind readers on behalf of the Library of Congress.

While each state covered by our study administers a similar range of programs, communities vary widely in the number as well as the quality of local agencies. At the time we conducted our study (1961) neither Portland (with a metropolitan population of more than 750,000) nor Johnston County, North Carolina (with a population of 63,000), boasted local agencies for their blind residents. Three of the metropolitan areas—Boston, Minneapolis, and Charlotte—were being served by private agencies. In Charlotte there were two such agencies, one offering social casework and recreational programs, and the other a workshop providing vocational training and employment (7). In

Minneapolis there were then two agencies providing direct social services. But in the Boston area there were no fewer than eleven private agencies serving blind residents, among them Boston Aid to the Blind, Inc., the Massachusetts Association for the Adult Blind, the Protestant Guild for the Blind, Inc., and the Catholic Guild for All the Blind—the latter offering an extremely wide range of services, including a well-known rehabilitation center. Such then is the complex—and sometimes overlapping—array of agencies extending help to blind people.

Who gets what? As noted earlier, two thirds of our respondents were receiving financial aid at the time we interviewed them—approximately half of this group getting Aid to the Blind (a federal-state program) and half obtaining funds from other sources. However, there was wide variation among the five areas with regard to the number getting financial help and the sources of funds. To illustrate, in Minneapolis fewer than half of those interviewed were receiving any form of financial aid, while in Johnston County the figure was much higher—85 percent. Or, to take another example, while only 10 percent in Portland were getting Aid to the Blind, the proportion receiving this major form of public assistance in Johnston County was 73 percent.

About these differences two things need to be said. First, the proportion of blind people getting financial aid in any community depends on the wealth of that community in general and of its blind residents in particular. As we saw earlier, blind people in rural Johnston County are much poorer than in Minneapolis—hence their greater dependence on social agencies for financial support. But variations in the number receiving the major form of public assistance, Aid to the Blind, also tend to reflect different state policies regarding the type of financial help recommended to blind residents—that is, if qualified, some of them may be encouraged to apply for other forms of assistance (for example, Old Age Assistance) which pay more. Hence the A/B figures do not necessarily indicate the full extent of financial need in each area (8).

Financial aid, while no doubt the most important form of help that many blind persons get, is only one of many types of assistance available to them. In our interviews we also sought to determine whether respondents had *ever* received any of the following services from public or private agencies serving blind persons in their communities: vocational training or counseling, help in going to school or



taking courses, visits from a home teacher, glasses or optical aids, travel training or help in traveling, assistance with housework or shopping, and medical treatment. While by no means a complete catalogue of services, this list included the most important forms of help being offered—apart from financial aid and books. Among our 684 respondents nearly a third had received free medical treatment (9), a somewhat smaller proportion had been visited by a caseworker, one quarter had been given vocational training, one fifth had received help with schooling, and smaller proportions had been given optical aids or had received help with traveling.

The five areas differed widely with regard to the number of blind people receiving each of these services. For example, while nearly half in Charlotte had received medical treatment, the figure in Portland was only one fifth. To take another example, in rural Johnston County, four fifths of our respondents had been visited by a caseworker on the staff of the state commission for the blind; in Minneapolis, which was being served by two private agencies as well as a state department, the proportion was only one tenth. On the other hand, while nearly two fifths of our Minneapolis sample had received vocational training or counseling, only a small fraction of our respondents in Portland and in Johnston County had obtained this kind of help. Still another example: in Minneapolis one quarter had received help in traveling outside their homes, but in Portland almost nobody in our sample had obtained this form of assistance.

Before trying to explain these differences, I must reiterate that we are dealing here only with help that blind people get from agencies specializing in problems of the sightless; excluded are various other forms of assistance which they or their families may be receiving from other sources—institutional and noninstitutional. Thus, the fact that blind people in Portland apparently get much less medical care under the auspices of social agencies than in Charlotte does not mean that the former need less help; rather, it may reflect differences in procedure between the two state agencies for the blind; it may also stem from the greater relative affluence of blind residents of Portland—that is, they may be better able to afford private medical treatment. Similarly, the variations we found among blind people in the five areas with regard to reading owe more to differences in their educational achievement than to operational differences between the regional libraries

serving them. On the other hand, it is difficult to believe that the blind of Portland need less help in getting about outside their homes than do blind residents of Minneapolis; yet the latter were getting much more help in this critical area of adjustment. In other words, the help that blind people get depends not only on their needs but on their own resources for meeting those needs and on the priorities given by state and local agencies to different social service programs. Whatever their needs, their opportunities for getting help vary widely—depending on where they live.

To enlarge our picture of the help that blind people get and need, we devised a composite *index of services or aid received*, including financial assistance and reading materials. We were particularly interested in comparing blind persons who had received no help from social agencies with those who had obtained a great deal of help (four or more different services). The first group I shall call the “unaided”; the second I shall refer to as the “aided” group. Before examining the factors that determine how much help a blind person gets, I must warn the reader that our index of services was unweighted. This meant that we gave help in housework or shopping the same value as financial assistance, and that visits from a home teacher were considered as important as vocational training. In reality, of course, different kinds of social service have varying degrees of importance to their recipients. Nor does our index weigh the quality of services received; we know that this also varies widely. Our aim was modest: to obtain some measure, however crude, of the two extremes in the help pattern—those who get much help and those who get none.

Blind residents of the five areas differed not only in the kinds of help they obtained but in the *number* of services received as well. There was, however, no direct relationship between the number of agencies providing services in any one area and the proportion of blind residents who actually got help. To illustrate, in Boston (which boasts a large number of private agencies as well as a state agency for the blind) one quarter of our respondents had received no special services whatsoever. On the other hand, in two sections of North Carolina (where blind people rely chiefly on services provided by the state) almost all of our respondents had received at least one type of service.

We found wide variation among the five areas in the number of blind persons who had received four or more services—the “aided”



group. In Boston, for example, only 18 percent fell into this category, while in our two North Carolina samples the figure was 32 percent. One interpretation of this finding, which I have suggested earlier, is that our North Carolina respondents, reporting far lower family incomes, were thereby much more likely to be dependent on the federal-state program of financial assistance (the most important element in the total array of services available to blind persons).

Contrary to our expectations, we found an inverse relationship between length of residence and the number of services received: among blind persons who had resided less than ten years at the addresses where we interviewed them only 11 percent had failed to obtain help from social agencies and 33 percent had received four or more kinds of services. On the other hand, among those who had lived *more* than ten years at their then current addresses 19 percent had obtained no help and only 23 percent had received four or more kinds or types of services.

A plausible explanation is that older persons—more likely to be long-time residents of their communities—had considerably less chance of getting help than their juniors. This is precisely what we found: the older the blind person, the less likely that he had obtained help from public or private agencies in his community. Thus, while only 4 percent of our respondents in the 21-to-39 age group had failed to get help, the corresponding figure for those 70 and over was 25 percent. Conversely, more than half of the younger group but less than 10 percent of those 70 and over had received at least four services.

This marked disadvantage of elderly blind persons—which I shall discuss later—can be explained in turn by relating their help pattern to the age at which they lost their sight. We found that the younger they were when blindness began, the greater their chance of getting help from social agencies. Only 6 percent of those who had suffered blindness at birth or soon after (up to age 3) had failed to obtain help. Among those blinded at age 60 or over, however, more than a quarter had received no assistance. Furthermore, nearly half of those blinded early in life had obtained at least four kinds of services from agencies, but the corresponding proportion among those blinded late in life was only 6 percent.

While chronological age and the age at which blindness began were major determinants of a person's help pattern, the degree of

visual loss was somewhat less important as a factor. However, in general, the less sight left to them, the more likely that our respondents had obtained help from social agencies. To illustrate, only 9 percent of the totally blind had failed to get help from agencies in their communities. Among those with reading vision—physically the most independent—the proportion managing without such help was 19 percent. Curiously, it was the middle vision group (that is, those with motion or object perception) which was least likely to have received an abundance of help.

So far I have been considering physical traits as correlates of getting help. What about social characteristics? Family income had relatively little effect on the *number* of services received. Among those with a family income of less than \$1,000, 16 percent had obtained no help, and 21 percent had received four or more types of services. But among those with an income of \$4,000 or more, 19 percent had failed to get help, and 27 percent had received four or more types of services. How the very poorest among the blind survive is difficult to understand; presumably their families provide some help.

Educational achievement also figures only slightly in determining our respondents' chances of getting outside help—that is, the least well-educated in our sample had received as much help as the most educated. However, the more “sophisticated” they were, the more likely that they had obtained help from social agencies in their communities; this is confirmed by recent studies showing that the more articulate inhabitants of poverty-stricken areas are generally more likely to know where to get medical care and social services (10).

Whether or not blind people received help was closely related to their degree of involvement in social life and community activities. The more isolated they were (as measured by our index of isolation) the less help they had obtained: among those scoring lowest on our index—the least isolated—nearly nine out of ten had received at least one type of service and one third had received four or more services. But among those scoring highest on this index—the most isolated—three out of ten had never been helped by a social agency and only one out of six had received four or more services.

The more active they were according to our various measures of social and cultural activity, the more help they had received from agencies serving them. To illustrate, among those scoring lowest on



our index of social activities (the least active) one fifth had never been helped and only one out of eight had received four or more services. In contrast, among those scoring highest on this index (the most active) only one out of ten had failed to get help and one third had obtained four or more services. Our index of "sedentary" activities discriminated in similar fashion between the unaided and the aided—that is, the greater their degree of activity the more help they had obtained. So too in the case of our composite index of social and cultural activities: among the low scorers (that is, the least active) one fifth had never been helped by social agencies and only 7 percent had received four or more services; among the high scorers (the most active) only 4 percent had failed to get help and nearly two fifths had received four or more services from agencies serving the blind.

Reading books was also a significant factor in determining our respondents' help patterns. Thus nearly a third of the nonreaders had never been helped by social agencies in their communities and only 5 percent had received four or more types of services. But among the heavy readers (four or more books during the previous month) almost everybody had obtained such help and more than one fifth had obtained four or more services—one of them being reading materials. A circular relationship operates here: blind persons who get braille or recorded books from their regional libraries make fairly good use of other social services offered to them; the converse is also true—that is, the more help they get from agencies in their communities the more likely that they will learn about and utilize the reading program that has been made available to them. In short, one set of services feeds into another. While this system does not work perfectly it is in such fashion that some blind people are drawn into the network of social agencies serving them.

However, it should be noted that when a blind man gets help from social agencies in his community, it is not just a function of his involvement in social and cultural life; rather it requires (perhaps even more importantly) his acceptance of his impairment and of the peculiar social status that that impairment often confers. Indeed, a number of observers have argued that it is not so much the loss of sight that stigmatizes the blind man; rather, it is his dependence on outside help for survival. It would hardly be surprising if those who identified themselves with "the blind" were getting more help from agencies serving this group than those who failed to make this identification. While the highly complex problem of

adjustment to blindness was beyond the scope of our study, as noted earlier we asked our respondents—all of them legally blind—whether they considered themselves “blind.” More than half said they *did not*. Furthermore, while only one in ten of those who regarded themselves as “blind” had failed to get help from social agencies and one third had received four or more types of services, among those who disavowed their blindness nearly one fourth had never obtained outside help and only one fifth had received four or more types of services. In other words, the greater their identification with “the blind,” the more help they got. As we shall see shortly, the converse of this statement is also true.

Regarding blind adults in our study who had received considerable help from social agencies in their communities (the “aided” group) little more need be said. For a variety of reasons they are highly dependent on the services offered by these agencies. We did not attempt to evaluate the quality of the assistance they had obtained or their satisfaction with that assistance; however, it is safe to say that at least something was being done about them.

But what of those who told us they had *never obtained any form of help* in connection with their blindness? Nearly one fifth (17 percent) of our 684 respondents fell into this “unaided” category (11). Because we limited ourselves to services provided by agencies serving blind persons exclusively, the unaided group may well have included persons being helped by other institutions and for reasons that had little or nothing to do with their blindness; it also included those who for one reason or another received no help at all. In any case, they were getting no assistance as “blind” people. Who were they?

To begin with, the unaided group was disproportionately old: 79 percent were 60 and over; in our sample as a whole the figure was 59 percent. Looking at it another way, blind persons age 70 or older—40 percent of our total sample—represented nearly *two thirds* of those who had failed to get help from social agencies serving the blind. In short, even elderly blind people registered by their states tend to remain outside the network of agencies concerned with blindness.

The unaided among the blind were also more likely to have lost their sight later in life: half had suffered blindness at age 60 or over; in contrast, only one third of our total sample had reached this age when blindness struck them. It seems reasonable to infer that persons who lose their sight early in life have greater opportunity to make them-



selves known to statewide or local agencies offering services to them. This may be particularly true of the congenitally impaired who have attended residential schools for the blind, one of the major institutional supports for the "subculture" of blindness. As we saw earlier, those who lost their sight early in life were also more likely to identify themselves as "blind" people, and the greater that identification the more likely that they had been helped by agencies serving the blind.

While differences were not great, the proportion among the unaided who had experienced a total loss of sight was somewhat smaller than in our total sample. This in turn may explain why, although older than the average blind adult in our study, the unaided were more likely to travel or get about without any aid.

When we looked at their social characteristics, we found that the unaided group was much lower in educational achievement than the aided in our sample (among the former 55 percent had advanced no farther than grammar school and only 16 percent as far as college, while among the latter the figures were 36 percent and 24 percent, respectively). Despite their greater age, however, the unaided were only slightly less likely to be employed.

Furthermore, the unaided were significantly more isolated and also considerably less active in their social and cultural life than the average blind person in our sample. Thus, nearly half of the unaided scored high on our index of isolation—indicating only limited contacts with friends and community organizations—as compared with only 25 percent of our sample population as a whole. The unaided were much less likely to read books (four fifths of them had read no books during the previous month and only 3 percent were heavy readers; in contrast, nearly half of our total sample had read at least one book and one in six were heavy readers). Finally, the unaided scored much lower on all three of our activity indexes: to illustrate, one third of them scored low on our combined index of social and cultural activities and only 4 percent scored high. Again, in sharp contrast, one fifth of our total sample scored low on this index of behavior and one sixth scored high. In other words, the unaided are pretty much out of things.

The physical and social characteristics of the unaided are descriptive; they do not tell us *why* this group fails to get help. We obtain a better clue to such behavior when we examine their attitudes toward blindness itself. Perhaps most striking, we found a direct relationship between

the amount of help they received from social agencies serving the blind and their tendency to regard themselves as "blind." The more help they got, the greater that tendency. Thus, among the unaided as a group little more than one quarter regarded themselves "blind"; but among the group which had received four or more types of services, the corresponding proportion was *more than twice as great*—three fifths (in our total sample of 684 the proportion was slightly under one half). In other words, the act of accepting help from "blindness" agencies strengthens their identification with "the blind" as a group. As noted earlier, the reverse is also true—that is, the stronger blind people's identification with the sightless as a group, the more assistance they receive from special agencies. I think it is safe to assume that the two experiences reinforce each other. Further evidence lies in the fact that the unaided were much less likely to consider "coping with sighted people" as the most serious problem faced by a blind person—that is, they are disinclined to segregate themselves symbolically from the sighted world. In all other respects they saw the same problems in blindness as did others we interviewed.

To sum up, although older than the average in our sample and therefore more detached from the cultural and social life of their communities, the unaided were less inclined to accept the dependent status conferred by blindness and the help pattern offered by specialized social agencies. Unwilling to make this psychologically crucial identification, they were less likely to seek help. Whether in fact they *needed* help to a lesser degree is another matter, as we shall shortly see.

## WHAT THEY NEED

The determination of people's needs for services depends on the nature of the problem at hand. For example, an ophthalmologist is best qualified to appraise a patient's need for medical treatment or for optical aids; the patient himself may not even suspect that such treatment is advisable. In the field of social services, however, the individual is generally better able to estimate his needs; poor people—blind or sighted—do not have to be told that they require more money. Of course, their awareness of such needs does not necessarily lead to knowl-



edge about how and where to get help. In our study we relied on what respondents *said* they needed in the way of help or services “because of their trouble with seeing” (12). I make no claim for the accuracy of their statements—that is, we do not know how much they exaggerated or underestimated their requirements.

Our most striking finding was that relatively few said they needed help or services of any kind: only 42 percent of the total sample told us they needed such help, while 52 percent indicated that they needed or required *nothing* (the remainder failed to provide us with any information regarding their needs). More surprising still, the amount of help they had received in the past or were getting at the time we interviewed them *had little or no effect on their desire for services*. Among the unaided 41 percent said there were services they would *like* to get; but among those who had received or were currently getting help from agencies, the proportion was slightly larger—44 percent. In other words, the unaided were no more—indeed they were slightly less—likely to want help than the aided.

How is it that the unaided express so little desire for help from agencies serving blind people? Other studies indicate that few of them obtain assistance from general community agencies. Whether this is the case we did not ascertain; but in view of their generally precarious financial position it is likely that at least some of them were getting help elsewhere. Another possibility, noted earlier, is that they really do not need help—that is, they manage with their own resources or those of their families. Still another possibility is that the unaided do not know how or where to get help. We have evidence from other studies that some blind people *are* uninformed about the help or services available to them in their communities (13).

More difficult to explain, however, is the group of blind adults who have already received considerable help (four or more types of services) from social agencies yet are just as anxious to get additional services as the unaided. It is possible that we are dealing here with a more helpless or dependent subgroup—that is, people whose needs are so serious that continued dependence on social agencies is the only future that they can foresee. But it is also possible, as I have suggested earlier, that since they were already receiving considerable help, they had acquired a certain expertise about getting services. In short, they knew where to go because they had been there before.

What kind of help do they need? When asked to specify the services they would like to get, financial aid was mentioned by 11 percent of our respondents, medical treatment by 10 percent, help with traveling, housework, and shopping by 8 percent, and vocational training by 7 percent. People looking for work were particularly anxious for job training. As we have seen before, these are the problems that most concern blind people.

Among the five areas we studied there were significant differences in the desire for services as well as in the amount of help provided. Thus, in Portland, where one quarter of our respondents had managed without help from agencies serving blind people, nearly three quarters said there was nothing they needed. On the other hand, in Charlotte, where almost everyone in our sample had been helped by the state commission for the blind, less than a third indicated that they could manage without such assistance. More specifically, in Portland only 6 percent said they would like to have financial aid; in Charlotte (a much poorer community) the proportion rose to 20 percent. The expressed need for medical treatment also varied among the five areas: in Boston, for example, only 5 percent said this was one of the services they would like to receive, but in Charlotte the figure was 19 percent.

The need for reading services or materials deserves separate comment, in view of the attention I have previously given to this activity. More than half of the nonreaders in our sample said they would like to read and expressed a need for the book services available to them. This varied widely among the five areas studied. Thus, nearly two thirds of the nonreaders in Charlotte and Johnston County (where only about a third of all blind adults read books) said they needed such services. On the other hand, in Portland (where approximately three fifths of all persons in our sample read books) little more than a third of the nonreaders said they needed book services—suggesting that at least in this area most potential readers were being reached by the regional library for the blind. More specifically, among blind adults who were not getting records (which includes persons using other reading modes) one third said they were “very interested” in receiving or getting them. And of those who were not being helped by volunteer readers, one fifth were very interested in obtaining such services.

Substantial numbers of blind people receive assistance of various



kinds from a far-flung network of public and private agencies. Others manage without outside help, or find it elsewhere. Our study revealed that access to services varies widely among the communities in which people live; even more important, there is a gross disproportion between the characteristics of our blind citizens and the programs developed by agencies serving the blind. Elderly blind people in particular are getting considerably less than their rightful share of social and other services. Those who have become detached from the community life around them are also deprived of help from agencies serving the blind. These discrepancies between the help blind people need and what they get from social agencies raise questions of planning and policy making which are best left to the concluding chapter.

## Integration

Many blind people need financial assistance, medical care, help with travel, and recreational services. This statement will come as no surprise to blind persons themselves or to the agencies that seek to help them; nor do I wish to belabor the obvious (1). Less obvious is why these conditions should persist in the midst of so much relative affluence and in view of considerable efforts toward improving the welfare of the blind—unmatched by comparable aid to most other disabled groups in the population. In these concluding pages I want to explore some of the broader implications of my study and particularly the reasons why so many blind people are still so isolated and deprived.

Before proceeding further, I wish to reiterate that not all blind people need to have things done “for” them. In an age of bureaucratic welfare agencies which frequently show more zeal in collecting “cases” than in providing necessary services, we tend to forget that whatever their afflictions many people rehabilitate themselves—that is, they have sufficient resources to get by without outside help. To be sure, some refuse assistance because they do not wish to be stigmatized, because of pride, or because of mistaken notions about self-reliance. Whatever the reason, we should not overlook the role of self-help in rehabilitation (2). Blind people should not be treated indiscriminately as constituents, or as a ready-made market for welfare agencies. Many of them want to be left alone.

Furthermore, as we have seen, blindness as a condition is not equally salient for all who experience it, especially if they have retained some useful vision. Their material needs probably do not differ widely from those of millions who are also elderly, idle, or poor, and it is as such rather than as the “categorically” blind that help should be provided for them.



But if some manage without help or can escape categorization, other blind people in need of assistance fail to get it. One of the most striking features of work for the blind is the disproportion between the demographic characteristics of blind people and the pattern of services offered them. A minority of the blind (the young) continue to receive the largest share of all social services available, while a majority (the middle-aged and the elderly) get little or no help (3).

This state of affairs has a long history. In the past blindness occurred relatively more often in childhood than it does now. The predicament of the sightless child struck a responsive chord in the hearts of philanthropists and in the general public. The field of services for blind people has traditionally reflected this concern (as in the establishment of special educational facilities) and consciously or unconsciously leaders in work for the blind may feel that it is better to "save" blind children than to help the elderly. Today there are proportionally few sightless children, and blindness increasingly has become a risk of old age. Yet social agencies have been slow to adapt their programs to this demographic trend. As a result, older people are neglected.

The great effort devoted to vocational training and placement—also disproportionate to the number of blind people of working age—stems from our traditional attitudes regarding the "curse" of idleness and from the difficulties that the physically impaired have always faced in obtaining employment worthy of the name. If anything, these obstacles are likely to mount higher with changes in our occupational structure; yet we spend far more trying to find or make work for the few who are young or healthy enough than in helping fill the idle hours of the far larger number who are either physically unable to work or have retired (4).

I do not question the necessity of providing special educational facilities for children (for example, the multiply handicapped) who cannot be accommodated in ordinary schools, or of trying to find rewarding employment for those who want to work but cannot function in the general labor market; they need all the help they can get. But in concentrating our efforts on special education and vocational rehabilitation for the young and able-bodied, we have neglected a much larger group—the aged—and their need for financial security, medical care, help with travel, and recreation. One of the most urgent tasks facing the field of work for the blind is to correct this imbalance.

There is another and more subtle way in which blind persons are denied equal access to social services. As we saw earlier, the more “sophisticated” they are, the greater their chance of getting help. Agencies for the blind chiefly serve those who ask for assistance. Irving Miller suggests that the aided group is one “which is able to adapt and accommodate to the style of the agency; a group with which the agency unintentionally develops a symbiotic relationship; a group which can more readily fit into the social system of the agency, whose needs and problems are more manageable and who fit a subtly developed and reinforced, implicit conception of the ‘good’ client” (5). This, of course, discriminates against those who are less knowing about the social agency world or do not wish to fit into it; the most underprivileged lack the social “skills” required to secure help, while more independent blind people—knowledgeable enough to get help—may reject the services available to them because they do not wish to play the “game” or are unwilling to be stigmatized (6). Parallels on a much larger scale can be found in almost every field of social service, as, for example, in the failure of the poverty program to reach those on the very bottom. This process of accommodation between program and client closes the door to many thousands of “hidden” blind people in our midst—hidden, that is, chiefly from the agencies which have been established for them.

But even those known to the social agencies have no guarantee that they will receive the full array of services which they may need. Many blind persons do receive one form of help (for example, talking books) but not others, because of lack of coordination between the various agencies serving them. A key problem for these agencies is how to extend the “feedback” process by which, for example, talking book readers learn about and get other services and those receiving other services hear about the special library program for the blind. Thus, a significant proportion of the nonreaders in our study (all known to the states that registered them) had never heard of the various reading programs. The fragmentation of services for blind people is as confusing to them as it is to other underprivileged groups being served by a myriad of competing, if not conflicting, organizations. The organizations may thrive but needs remain unsatisfied.

Let us look more closely at those needs. First, for many blind people as for others who are seriously disabled, is the problem of *income*



*maintenance*. In this richest of all countries most blind people are scandalously poor. Why this is so owes much to a tradition of relief in which poverty is regarded chiefly as a personal rather than as a social problem. Poor people—deserving or undeserving—are extended a minimum of assistance in the expectation that they will become self-supporting. But instead of encouraging underprivileged persons to regard such assistance as a right due them because of circumstances beyond their control, we require means tests and build an impersonal apparatus of public assistance which destroys the very human dignity to which they are intended to contribute. These arrangements have long characterized our treatment of financially dependent blind citizens; they also govern our present “war” against poverty (7).

One result is that we are niggardly in helping to ease the financial burden which many blind people face. To be sure, few of them starve in this day and age, but little progress has been made in narrowing the enormous gap between them and the more affluent sectors of our society. At least half of the blind receive various forms of public assistance; it is doubtful whether any other group in our society has such a large proportion on relief. More than *half* of the respondents in our study reported a family income (in 1961) of less than \$3,000 per year; this was more than twice the proportion in the United States as a whole. While recent (1965) amendments to the Social Security Act raise the amount provided to the blind under our system of public assistance, they leave untouched the basic financial problems of blind people unable to find work or—more commonly—those who experience loss of sight at a time in life (old age) when income tends to drop. Many, if not most, blind Americans will remain financially dependent. But we are still far from granting all citizens in need the right to an adequate income; indeed the welfare state has yet to be extended to the very poor who need it most (8).

In addition to their poverty blind people must cope with very serious *medical problems*. The elderly in particular face other, sometimes equally disabling, chronic conditions. Few can afford proper medical care, and the fragmentation of social and medical services (noted earlier) complicates their search for help. Recent amendments to the Social Security Act authorize a greatly enlarged program of health care for the medically indigent and for those over 65 (9). When fully

implemented, this program may go further than any other yet conceived to reduce the burdens many blind people face.

Whether such benefits will increase the *mobility* of older blind persons is another matter. Just as we make a cult of financial or economic independence, so too we tend to glorify physical independence or mobility, despite our pronounced sedentary tendencies (10). On the obvious grounds that the more mobile they are the greater their chances of becoming integrated into society, great effort has been made to train blind people in the use of mobility aids and (more recently) to develop sophisticated electronic guidance devices. No doubt some will be helped by this effort. But the simple fact is that not all blind people can achieve mobility even with the best of prosthetic aids, particularly if they are elderly or suffer from other chronic conditions. Must they try? Or, if they fail, must they suffer? In my opinion, as much effort should be devoted to bringing the community to blind people (directly and indirectly, as in the case of recorded and broadcast media) as to bringing them to the community. In our age of mass communications the immobility of blind persons need not be the handicap it was in the past.

If we need to be realistic about blind people's chances of achieving financial independence and physical mobility, we must also look hard at their opportunities for *obtaining useful and rewarding employment*. In my opinion the opportunities are poor and not improving; little has been done to prepare them (or any other disabled group) for work in a rapidly changing economy with its increasing demand for professional and technical personnel (11). To be sure, a few blind people have pursued successful professional careers, but many continue to make brooms by hand (to cite just one example), while elsewhere entire production factories are automated. If broom-making were a highly valued craft, blind workers might well be encouraged to devote themselves to it. Such labor seems out of place in a technological society which has destroyed most handicrafts and it contributes little to general welfare, let alone to those engaged in such work. Meanwhile, other blind people of working age are unable to find work of any kind. The likelihood is that many of them never will (12). Indeed, if present trends continue, we are going to have a permanent body of unemployed; among them will be found many otherwise able-bodied blind persons. To



cope with this problem some economists inside as well as outside the government have urged that those whose incomes fall below a certain level, employed or unemployed, receive direct cash payments from the government (13). This, of course, is not the only alternative (14), and in any case its implementation lies in the future. But in light of these trends vocational rehabilitation for the blind needs a far more critical appraisal than it has yet received. No less important than training for work may be training for a nonproductive existence.

For most blind people, especially those who lose their sight after retirement, the problem of unemployment does not exist. Voluntarily or involuntarily, they face years of enforced idleness and have a considerable amount of time on their hands. But while we invest heavily in efforts to find them work, we have, with one notable exception—recorded books—made no equivalent investment in *planning for their recreation*.

Can there be such planning? The aristocratic approach to leisure and recreation finds such planning repugnant; indeed, leisure conceived largely as self-expression and planning (by the state or some other authority) are regarded as antithetical if not contradictory in their terms. But the fact is that much of our recreation *is* planned in some fashion—if not in the public interest—by a multibillion-dollar entertainment industry. Aside from its maintenance of national parks, the federal government, on the other hand, has done little in the way of planning for recreation; most of the parks are inaccessible to the bulk of our citizens on the east coast and to the blind.

The organized recreation “movement,” with its stress on group activities, also reaches relatively few people. Only a fraction of the aged join the special clubs which have been set up for them throughout the country. Almost none in our sample of blind adults were involved in organized recreation and few said they wanted to be. This is not necessarily an indication of the failure of organized recreation; it has an important role to play in institutional settings, although the selective process by which such groups are formed may alienate many of those for whom the groups are intended. Nowadays, of course, it is fashionable to sneer at group recreation, but I myself have seen elderly blind clients of social agencies happy merely to spend the day in the company of other human beings, without necessarily taking part in group activities. The basic problem, however, is that many blind people are home-

bound and cannot be helped by even the most imaginatively conceived recreational programs.

Hence the great appeal of the broadcast media and of the talking book program, both of which succeed in reaching many homebound isolates. I think it is safe to say that the book program is the most successful of all social services offered to the blind; next to the system of public assistance it reaches the largest number of clients. This, of course, is not the only criterion of its success; most blind people receiving talking books are highly gratified by the service. Nevertheless, there is little room for complacency about this program. (15). As noted earlier, many blind people have yet to be informed about the devices and services available to them. In our study well over half of the nonreaders had never heard about volunteer readers and more than a quarter had never heard about the talking book program itself, although this service is more than thirty years old. It would be naive to expect that all blind persons who say they would like to read can actually become readers, particularly those whose age, health, education, and family background are unlikely to give them a taste for books. Even if only a few can be helped, however, an effort to extend the book program will be worthwhile. But if they are to be helped, greater efforts in education will be needed, and not just among blind persons. Without such education people will not read, however easy it is made for them.

Meanwhile, although the United States presently lags behind other countries in the development and distribution of new reading devices, eventually it will become easier than ever before for a sightless person to obtain and enjoy the reading matter he desires (16). When this happens, considerable effort will be required to educate and prepare blind persons for electronic revolutions in reading devices and methods.

Regarding most of the problems I have discussed so far—financial assistance, medical care, book programs—our nation has more than adequate resources to help reduce the burdens of blindness. Thus, as compared with our total investment in welfare, the amounts required to ensure blind persons a decent standard of living would be relatively small and without straining our economy in the least we could double or even quadruple the monthly payments to blind people receiving public assistance. But eliminating the material problems of blind people



will not immediately end the stigmatization and social isolation which many of them face.

The reason is that we are dealing here with a combination of attitudes and institutional practices which yield slowly to the forces of change. In approaching this complex question some observers suggest that the problems of blindness stem largely from the attitudes of the sighted world, or even that blind people constitute a "minority group" (17). But it is not attitudes alone that stigmatize and isolate the blind. They are not despised or persecuted. As a matter of fact, recent studies indicate that while blindness is feared as a disability, attitudes regarding blind people show no distinct pattern of approval or disapproval (18). As for their alleged minority status, one of the most conspicuous features of minority group life is residential segregation. But most blind persons live as individual members of families and, as we have seen, relatively few of them get concentrated attention from welfare agencies; still fewer live or work together in special residential institutions or workshops.

Nevertheless, the growth of special institutions for the blind has in some respects tended to segregate those who are most dependent on the agencies for their education, employment, and recreation and hence to perpetuate their isolation (19). Over the years hundreds of social agencies and their staffs (blind and sighted) have acquired a powerful vested interest in work for the blind and in maintaining their traditionally dependent status. Were that status to change radically, these agencies would lose their *raison d'être*. There has even emerged a small but vocal movement exclusively "of" the blind to protect their interests and advance their cause. Hence pressure mounts from both sides to maintain the barriers between blind and sighted persons. As Thomas Cutsforth wrote of his fellow blind citizens: "We lose contact with the community in which we live, we become incapable of forming an integral part separately and individually in that community, and we develop almost a paranoid attitude toward the community of fear, hatred, suspicion, and greatly enhanced feelings of rejection and inadequacy" (20). Such "pathologies" are certainly not inherent in the sightless; rather they stem from the institutional settings our society has created for its blind members (21).

The ironical situation which blind people face (along with others dependent on the welfare apparatus) is that institutions emerge to

offer services that their families and communities are either unable or unwilling to provide; in time the agencies themselves become self-serving, defeating the very purposes—rehabilitation and integration—for which they were established. This transformation of means into ends can be found in all social institutions; what makes it especially poignant in the welfare field is that real people with real problems become the victims. As Richard M. Titmuss has suggested, we assume “that the establishment of social welfare necessarily and inevitably contributes to the spread of humanism and the resolution of social injustice. The reverse can be true. Welfare, as an institutional means, can serve different masters. A multitude of sins may be committed in its appealing name. . . . Welfare may be used to narrow allegiances and not to diffuse them. . . . What matters then, what indeed is fundamental to the health of welfare, is the objective towards which its face is set: to universalize humanistic ethics and the social rights of citizenship or to divide, discriminate and compete” (22).

Can welfare for the blind help unite them with the larger community or must it persist in separating them from that community? No miracles should be expected; but if “integration” is not to be merely an empty slogan and blind people are ever to escape the stigmas and institutional cul-de-sacs which our society has created for them, we shall need far more imaginative planning than has so far distinguished work in this field of welfare.

What can such planning accomplish? The modern field of social service, here and abroad, offers many examples of creative thinking that might well be applied to work with blind persons. Thus, in a number of West European countries, children’s playgrounds have been built next to special housing units for the aged, the purpose being partly to stimulate old people by providing them with the company of the very young but also to enlist the help of the aged in caring for the young, particularly the children of working mothers. To take another example, in our own poverty program the idea has been hit upon of training and employing selected inhabitants of slum neighborhoods to help their neighbors in matters relating to their health and welfare. The aims of this campaign are to help reduce the serious shortage of professional welfare workers and to meet the need for social services. No less important, such “nonprofessional” welfare workers help themselves by serving others (23).



Is there any reason why at least a few blind people could not be given such employment to help others who have lost their sight, or those suffering from other disabilities or impairments? This idea is not new. A few years ago Cutsforth wrote: "I hope to live to see the day when some state organization of the blind . . . will initiate and support a completely non-blind project, for the benefit not of blind people, but of people, as our peers. . . . What would be the change in our attitude towards ourselves as we turned our interest and energies outward and abandoned the role of the beggar who solicits for himself?" (24). As far as can be determined, this challenge to the blind remains unanswered.

Still another way in which blind people (and the agencies serving them) could help others would be to broaden the scope of certain welfare and recreational programs—now limited almost exclusively to the blind—in order to reach the much larger number of persons with visual impairments who do not fall within our arbitrary "legal" definition of blindness. To be sure, recent legislation has authorized the extension of the talking book program to other handicapped groups; but this is only a start in the right direction. Any effort to expand such programs and reach a larger population will require major changes in the structure as well as in the function of the many public and private agencies offering help to the blind. Furthermore, little would be gained—and much lost—if in accepting such services the nonblind were also to be stigmatized as dependent or helpless. Must this be the case? By sharing with others some of the many benefits and privileges so far accorded them alone, blind persons might begin to escape from the stigma which has been attached to their condition. The risks would appear to be well worth taking.

These are just a few examples of steps that could be taken to help sightless people become integrated in the community. Perhaps only a few of them can be helped. But even this would be better than nothing. Evidence that many blind people are willing—indeed eager—to help others comes from our own study. Thus, when asked about their "most important goal in life," one in seven said they wanted to be of service to others like themselves. Pious platitude? The best way to test their sincerity is to make opportunities for service available to them. Numerous "action" programs in the war against poverty show that it can be done.

In the final analysis, however, there is no welfare program or

technological device that can ensure the integration of blind people in their communities. Blindness is no more a "problem" to be "solved" than poverty. Perhaps above all, the status of blind people in our society cannot be separated, let alone dealt with apart, from other aspects of social welfare (25). When all of our citizens enjoy the right to financial security, adequate medical care, decent education, and the pursuit of leisure then—and not before—blind people will be able to join the community which hides and isolates them more than it rejects them.

Some day medical science may ensure that no one need suffer blindness at any age. Some day, even sooner, there may be highly sophisticated devices to help the blind in their daily lives, such as electronic object detectors (using the principles of radar) which will permit them to get about otherwise unaided. Experimental work on such devices is going on in a number of laboratories here and abroad, but there are many engineering problems to be solved and none has yet been invented that works as well as a sighted companion, a cane, or a dog (26). Experiments are also proceeding with reading machines—that is, devices that can scan ordinary printed type and feed it back to the blind reader by various means, directly and indirectly (27).

Meanwhile, we face the immediate human problem of hundreds of thousands who are trying to cope with blindness today and the additional thousands who may become blind in the near future. As in so many other aspects of modern life, our technological capabilities are far more advanced than our social skills. Amazing new devices still on the drawing boards or in an experimental stage will not assure blind people of acceptance by their sighted neighbors. A much greater effort than we have ever known will be required to help them share more equitably in the social life, wealth, and leisure of their communities. As noted earlier, it is not just a matter of more money; our rich country can easily afford to provide its relatively few blind citizens with greater financial security whether they work or not. What money cannot buy, however, is a life with dignity and a breakdown of the barriers that separate blind people from their neighbors. The achievement of this goal must engage blind and sighted alike. Sighted people have much to learn about blindness and ways of reducing its burdens for those



whom it strikes and for their families. For their part, blind persons should be encouraged to abandon their separate world and rejoin the larger community. But if they try, will it be open to them?

On a small scale the status of the blind mirrors the even greater problem of joining together diverse groups in a society that is "integrated" largely by wars or more superficially by the mass media, but that remains essentially split by our many divisions of class, ethnic group, and race. Precisely because they have received so much attention and yet so much remains to be done, the blind should be a warning to the rest of us and a test of our commitment to share our great material and cultural wealth with the disadvantaged. If we cannot open up our society to the blind and disabled, what reason is there to believe that we can do so for the much larger numbers of poor and elderly in our midst? "When you're as old as I am," one of our respondents told us, "you're not interested in [anything]. I'm not coming in, I'm going out." Our society no longer regards blindness as evil, but this does not prevent us from practicing "civilized" cruelties against the blind.

Along with other disadvantaged groups in our society, blind people and their particular problems are invisible in the sense that most of their sighted neighbors are simply not aware of them. Some blind persons prefer this arrangement—they escape stigmatization; but others sense their invisibility very keenly and suffer from it. "My greatest problem as a blind person," said one of our respondents, "is that the man who can't see is not in this world. Nobody is interested in him. They think you're not there." But he—and many others like him—is very much there.

There are worse things than being blind, Mark Twain said; it is far more terrible to have eyes and not to see.

# References

## Chapter 1

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2. Sebastian de Grazia. *Of Time Work and Leisure* (New York: The Twentieth Century Fund, 1962), pp. 246-7.
3. Harold L. Wilensky. "The Uneven Distribution of Leisure: The Impact of Economic Growth on 'Free Time,'" *Social Problems*, Vol. 9, No. 1, Summer, 1961.
4. De Grazia. *Op. cit.*, Chap. 3.
5. Georges Friedmann. "Leisure in an Automated World," *Nation*, September 1, 1962.
6. Herbert Collins. "The Sedentary Society," in Eric Larrabee and Rolf Meyersohn, eds., *Mass Leisure* (Glencoe, Ill.: Free Press, 1958); cf. Max Kaplan, *Leisure in America* (New York: Wiley, 1960), Chap. 17, "Immobility as Leisure."
7. *Report to the Outdoor Recreation Resources Review Commission. Participation in Outdoor Recreation: Factors Affecting Demand Among American Adults*. Washington, D. C., 1962. Chap. 3.
8. Harold L. Wilensky. "Mass Society and Mass Culture," *American Sociological Review*, Vol. 29, No. 2, April, 1964, p. 181.
9. See Bernard Rosenberg and David M. White, eds., *Mass Culture* (Glencoe, Ill.: Free Press, 1957); Dwight Macdonald, "Masscult and Midcult," *Partisan Review*, Vol. XXVII, Nos. 2 and 4, Spring and Fall, 1960; *Daedalus*, Spring, 1960, special issue on "Mass Culture and Mass Media."
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11. Georges Friedmann. "Leisure and Technological Civilization," *International Social Science Journal*, Vol. XII, No. 4, 1960, pp. 518-19.
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13. De Grazia. "The Uses of Free Time," in *Aging and Leisure*, *op. cit.*, p. 126.



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16. *Ibid.*
17. De Grazia. "The Uses of Free Time," in *Aging and Leisure, op. cit.*, p. 120.
18. Cowgill and Baulch. *Op. cit.*
19. J. N. Morgan. *Patterns of Family Change in America* (Ann Arbor: University of Michigan, Survey Research Center, 1961).
20. Harold L. Wilensky. "Life Cycle, Work Situation, and Participation in Formal Associations," in Kleemeier, ed., *Aging and Leisure, op. cit.*, p. 239.
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22. Mark Zborowski and Lorraine Eyde. "Aging and Social Participation," *Journal of Gerontology*, Vol. 17, October, 1962.
23. John E. Anderson. "The Use of Time and Energy," in James E. Birren, ed., *Handbook of Aging and the Individual* (Chicago: University of Chicago Press, 1959), pp. 786 ff. Also, Mark Zborowski, "Aging and Recreation," *Journal of Gerontology*, Vol. 17, July, 1962.
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25. Lenore A. Epstein. "Income of the Aged in 1962: First Findings of the 1963 Survey of the Aged," *Social Security Bulletin*, Vol. 27, No. 3, March, 1964.
26. Michael Harrington. *The Other America: Poverty in the United States* (New York: Macmillan, 1962), Chap. 6.
27. James N. Morgan, Martin H. David, Wilbur J. Cohen, Harvey E. Brazier. *Income and Welfare in the United States* (New York: McGraw-Hill, 1962), p. 239.
28. U. S. National Center for Health Statistics. *Medical Care, Health Status, and Family Income, United States* (Washington, D. C.: U. S. Department of Health, Education and Welfare, Public Health Service, 1964).
29. The exception, of course, is television, since 90 percent of all American households have at least one TV set. The relationship between income and recreational spending is fairly well established: in 1950, families with an income under \$1,000 spent 3.4 percent of their income on

recreation, reading, and education combined. Among families with an income of \$10,000 and over, the proportion was 7.8 percent. More recent data are available in the report to the Outdoor Recreation Resources Review Commission.

30. R. Clyde Whyte. "Social Class Differences in the Uses of Leisure," in Larrabee and Meyersohn, eds., *Mass Leisure*, *op. cit.*
31. James N. Morgan *et al.* *Income and Welfare in the United States*, *op. cit.*, p. 326.

## Chapter 2

1. Defined in most states as 20/200 or less visual acuity in the better eye with correction, or an equally disabling loss of the visual field. This is often referred to as the "legal" definition of blindness and it is intended to determine eligibility for public assistance and many other benefits and privileges.
2. For a recent synthesis of demographic data on blindness, see Monroe Lerner and Odin W. Anderson, *Health Progress in the United States: 1900-1960* (Chicago: University of Chicago Press, 1963), Chap. 20, "The Changing Aspects of Blindness." Also the *NSPB Fact Book, Estimated Statistics on Blindness and Vision Problems* (New York: The National Society for the Prevention of Blindness, Inc., 1966).
3. Ralph G. Hurlin. "Estimated Prevalence of Blindness in the United States and in Individual States, 1960," *Sight-Saving Review*, Vol. XXXII, No. 1, Spring, 1962.
4. Eugene Rogot, Hyman Goldstein, and Irving D. Goldberg. "Reported Incidence of Blindness in Selected States in 1962," *Public Health Reports*, Vol. 79, No. 9, 1964. Also Hyman Goldstein and Irving D. Goldberg, "The Model Reporting Area for Blindness Statistics," *Sight-Saving Review*, Vol. 32, No. 2, Summer, 1962.
5. U. S. National Health Survey. *Selected Impairments by Etiology and Activity Limitation, United States, July 1959-June 1961* (Washington, D. C.: U. S. Dept. of Health, Education and Welfare, Public Health Service, 1962). For a discussion of the implications of this approach, see Milton D. Graham, "Towards a Functional Definition of Blindness," *The New Outlook for the Blind*, Vol. 53, No. 8, October, 1959.
6. I have discussed this problem in "Screening for Visual Impairment," *Public Health Reports*, Vol. 80, No. 1, January, 1965.
7. U. S. National Center for Health Statistics. *Binocular Visual Acuity of Adults, United States, 1960-1962* (Washington, D. C., U. S. Dept. of Health, Education and Welfare, Public Health Service, 1964).
8. On the relationship between age and blindness, see Norvin C. Kiefer and Manuel Rodstein, "Aging—Facts and Fallacies," *Sight-Saving Review*, Vol. XXXV, No. 2, Summer, 1965; Jeanne G. Gilbert, "Aging Among Sighted and Blind Persons," *The New Outlook for the Blind*, Vol. 58,



- No. 7, September, 1964; and Wilma Donahue and Douglas C. MacFarland, "Aging and Blindness" in the annual report of the American Association of Workers for the Blind, *Blindness*, 1964.
9. These estimates are derived from the *NSPB Fact Book: Estimated Statistics on Blindness and Vision Problems* (New York: National Society for the Prevention of Blindness, 1966) and from a paper on "Statistical Implications of the Problem of Geriatric Severe Vision Impairment and Blindness" which was presented by Hyman Goldstein at the Research Conference on Geriatric Blindness and Severe Visual Impairment (co-sponsored by the American Foundation for the Blind and the Administration on Aging) held in Washington in 1967.
  10. Mortimer Spiegelman. "Longevity and Mortality in the American Population" in Ronald Freedman, ed., *Population: The Vital Revolution* (New York: Anchor Books, 1964), pp. 107-108.
  11. For a justification of our reliance on subjective reports, see Appendix B.
  12. In another study, I did attempt to validate self-reporting of visual impairment. See "Screening for Visual Impairment," *Public Health Reports*, *op. cit.*
  13. It has been said that more people are blinded by definition than by any other cause. See Milton D. Graham, "Towards a Functional Definition of Blindness," *op. cit.*
  14. John Cohen. *Humanistic Psychology* (New York: Collier Books, 1962), p. 191.
  15. Fred Davis. "Deviance Disavowal: The Management of Strained Interaction by the Visibly Handicapped," *Social Problems*, Vol. 9, No. 2, Fall, 1961.
  16. The question was: "Some people who can see to some extent consider themselves blind, and others don't. Do you consider yourself blind or not?"
  17. Robert H. Mugge. "Recipients of Aid to the Blind," *Welfare in Review*, April, 1965.
  18. Nearly half of all recipients of Aid to the Blind are described as having other chronic conditions. Cf. Robert H. Mugge, *op. cit.*
  19. Attitudes toward and adjustment to blindness were not the primary subject of this study; however, I shall return to the problem of self-perception in dealing with the help that blind people seek and get. See Chapter 6.
  20. U. S. National Health Survey. *Selected Impairments by Etiology and Activity Limitation, United States, July 1959-June 1961*, *op. cit.*
  21. U. S. National Health Survey. *Chronic Conditions Causing Limitation of Activities, United States, July 1959-June 1961* (Washington, D. C.: U. S. Dept. of Health, Education and Welfare, Public Health Service, 1962).
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23. Samuel Finestone, Irving F. Lukoff, and Martin Whiteman. *The Demand for Dog Guides and the Travel Adjustment of Blind Persons* (New York: Research Center of the New York School of Social Work, Columbia University, 1960), Chap. 5.

### Chapter 3

1. Mugge. "Recipients of Aid to the Blind," *op. cit.*
2. Finestone, Lukoff, and Whiteman. *The Demand for Dog Guides*, . . . *op. cit.*, p. 35.
3. U. S. National Health Survey. *Impairments by Type, Sex, and Age, United States, July 1957–June 1958* (Washington, D. C.: U. S. Dept. of Health, Education and Welfare, Public Health Service, Division of Public Health Methods, 1959). In a sample survey of the visually impaired (defined as in the Health Survey) conducted in Cleveland by the American Foundation for the Blind in 1963, 21 percent were working, 5 percent were looking for work, 17 percent reported themselves unable to work, and 32 percent were retired.
4. Mugge. *Op. cit.*
5. Finestone *et al.* *Op. cit.*
6. Underemployment is also typical of blind people in England and Wales where, in 1957, less than a third of all blind residents of working age and only 11 percent of all blind people were working.
7. This is a variation on the theory that partially sighted blind persons because of their "overlapping" status face greater problems of adjustment than the totally blind. What I am suggesting is that the partially sighted group displays a fairly wide range of adaptive behavior and cannot be categorized. Cf. Emory L. Cowen *et al.*, *Adjustment to Visual Disability in Adolescence* (New York: The American Foundation for the Blind, 1961), p. 13.
8. See Chapter 6.
9. The distinction between manual and nonmanual occupations has more bearing on status differences than on income; many skilled workers, of course, earn far more than certain categories of white-collar workers. Historically, the great shift in the American occupational structure has been from manual to nonmanual occupations. Evidence of this trend is available in our own study. Thus, we found that as compared with their fathers, many of our respondents before becoming blind had succeeded in moving up the ladder of occupational mobility—as had many of their contemporaries. To illustrate, while three quarters of their fathers had been employed as manual workers, the proportion among those of our respondents who had worked before the onset of blindness fell to 62 percent. Put otherwise, while only a quarter of their fathers had been in nonmanual occupations, 38 percent of them had achieved white-collar status before losing their sight.



10. Twelve in this group provided no information on their previous occupations.
11. Paul Goodman. *Growing Up Absurd* (New York: Random House, 1960), p. 17.
12. For a more optimistic view, see Walter S. Neff, "Automation's Effect on the Handicapped Worker," *Rehabilitation Record*, Nov.-Dec., 1963.
13. U. S. National Center for Health Statistics. *Medical Care, Health Status, and Family Income, United States, op. cit.*
14. Figures in the text on the family income of blind respondents are based only on the total who reported to us on income. A sizeable minority (more than a third in Boston) either did not know what their family income was or refused to provide information—possibly out of fear that they would be disqualified for public assistance. Table 10 in Appendix A shows the distribution of income for *all* respondents in each of the five areas; included in the base are those who refused to provide information as well as the "don't knows."
15. As noted above, it is possible that some blind people underreport their income for fear that they will be disqualified for public assistance and other services.
16. Mugge. *Op. cit.*
17. See Chapter 6.
18. *Ibid.*
19. For a discussion of the implications of Medicare for the blind, see Irvin P. Schloss, "Up to Date in Legislation," *The New Outlook for the Blind*, Vol. 59, No. 8, October, 1965.
20. One eighth of our respondents said that money problems were the most serious faced by a blind person. One third said they worry about money—more than mentioned any other problem.
21. An alternative explanation is that blind people in this age group, having lived far beyond the normal span of years, are sturdier than most and therefore more self-reliant.
22. See the special issue of the *New Outlook for the Blind*, Vol. 58, No. 8, October, 1964, on living arrangements.

#### Chapter 4

1. Gary A. Steiner. *The People Look at Television: A Study of Audience Attitudes* (New York: Alfred Knopf, 1963), p. 19.
2. It is reported that some blind people have the video tubes removed from their sets, thereby actually transforming them into radios.
3. Steiner. *Op. cit.*, p. 126.
4. To identify this group, we simply combined the hours spent listening to radio with the time spent watching TV. It is possible, although not likely, that the two sets are on simultaneously. Our question, however, dealt with individual listening time, not with set time.

5. This is suggested by the fact that about half of their friends live outside their immediate neighborhoods.
6. Murray Hausknecht. *The Joiners* (Totowa, N. J.: Bedminster Press, 1962), p. 23.
7. Approximately half the joiners were in organizations "for" the blind.
8. As noted earlier, most of our respondents lived in cities or suburbs. It is instructive, therefore, to compare our findings regarding isolation with results of the companion study of 100 blind adults in rural Utah. Thanks in large part to the powerful role of the Mormon church, the blind in Utah were much less isolated. See William M. McPhee and F. LeGrand Magleby, *Activities and Problems of the Rural Blind in Utah* (Salt Lake City: University of Utah, 1963).
9. Ten percent of our respondents said that social isolation was the most important problem faced by a blind person.
10. Erving Goffman. *Stigma: Notes on the Management of Spoiled Identity* (Englewood Cliffs, N. J.: Prentice-Hall, 1963), Chap. 1. Also, Simon Olshansky, "Stigma: Its Meaning and Some of its Problems for Vocational Rehabilitation Agencies," *The New Outlook for the Blind*, Vol. 59, No. 8, October, 1965. See Chapter 7 for further discussion of this problem.
11. In rural Utah, where almost all of 100 blind adults studied belonged to the Mormon church, 61 had attended church during the month prior to interviews with them. See McPhee and Magleby, *Activities and Problems of the Rural Blind in Utah*, *op. cit.*
12. Many states, including the four in which we conducted our study, permit blind voters to be assisted at the polls by sighted helpers of their own choosing.
13. For a description of the index and of the weighting system used, see Appendix B.
14. *Ibid.*
15. *Ibid.*

## Chapter 5

1. In the nationwide television audience study to which I referred earlier, only 9 percent of the sample picked reading as a favorite leisure activity; 23 percent mentioned television. Steiner, *op. cit.*
2. In rural Utah more than 80 percent of the blind adults described themselves as book readers.
3. For a description of this program and an evaluation of its effectiveness, see Francis R. St. John, *Survey of Library Service for the Blind, 1956* (New York: American Foundation for the Blind, 1957).
4. See below in this chapter.
5. By which age they had presumably learned how to read.
6. Information was obtained only about blind adults who were living with sighted persons.



7. Defined as those who had read only one book during the previous month.
8. Howard Haycraft. "Books for the Blind," *ALA Bulletin*, October, 1962; also Kevin Wallace, "The Recorded Companions," *The New Yorker*, November 3, 1962.
9. There was some variation among the areas studied. To illustrate, only 16 percent of our Portland readers and 30 percent of our Boston readers thought their respective libraries needed improvement.
10. For a contrary view, see Ved Mehta, "Reading from Records," *The Saturday Review*, July 26, 1958.
11. In our study some 10 percent of the respondents reported that they had tape recorders of their own; on the other hand, only 1 percent of the readers said they do most of their reading with tapes—a reflection no doubt of the high cost of tape equipment, the relative scarcity of taped materials, and serious difficulties in distributing such materials.
12. Books, of course, are not the only reading materials that reach blind persons. As we saw earlier, half of our respondents reported that they were having newspapers read to them (although only one fifth of them do so regularly). Furthermore, more than 40 percent of them were receiving magazines in braille, in records, or in ordinary print; more than a fifth were having magazines read to them. In most cases—three quarters to be exact—other family members perform this service. Volunteer readers assist only about 2 percent with magazines.
13. This finding is supported by Jan Hajda's study of the reading habits of 1,722 women; social integration actually encourages and sustains regular reading. "A Time for Reading," *Trans-Action*, June, 1967.

## Chapter 6

1. Which permit blind travelers to obtain free transportation for sighted companions on trains and buses.
2. Gerald Gurin, Joseph Veroff, and Sheila Feld. *Americans View Their Mental Health* (New York: Basic Books, 1960), p. 29.
3. *Ibid.*, p. 45.
4. In support of the theory of "overlapping status" mentioned earlier, we found that respondents with reading vision were more likely than the totally blind to mention problems of adjustment to blindness. On the other hand, those without any useful vision were much more likely to mention social isolation as a problem.
5. Some respondents mentioned more than one goal.
6. In Massachusetts these functions are performed by a Division of the Blind operating under the State Department of Education. In Minnesota they are undertaken by an office of Services for the Blind in the State Department of Public Welfare. North Carolina operates an independent agency, the State Commission for the Blind. Oregon has established

a State Department of Services for the Blind under its Commission for the Blind and Prevention of Blindness. These agencies help administer federally subsidized programs.

7. Shortly after we completed our field work, the Division of Community Services in the American Foundation for the Blind conducted a separate study of local agency programs in Charlotte and issued a series of recommendations for their improvement. See *Services for Blind Persons in Mecklenburg County, North Carolina, February, 1962* (New York: American Foundation for the Blind, 1962).
8. As noted earlier, in Chapter 3, the actual amounts paid under the A/B program also vary widely among the states.
9. As noted earlier, in Chapter 3, an equal proportion of nationwide A/B recipients get medical care through their state public assistance agencies.
10. Our index of sophistication was produced by cross-tabulating years of schooling and scores on a 40-item vocabulary test adapted from the Wechsler-Bellevue Intelligence Test. Essentially, the index yielded a measure of verbal ability.
11. The registers on which we based our samples did not include all blind residents of the four states. It is reasonable, therefore, to assume that if those missing from the registers had been represented in our study, the figure for the "unaided" group would probably have been significantly larger. States register their blind residents primarily to help in planning programs for them, but the fact that a person is registered does not necessarily mean he needs help or is getting it.
12. Our question was: "Are there any particular kinds of help or services that you would *like* to get because of your trouble with seeing?"
13. This evidence comes from a study of 127 visually impaired persons which the American Foundation for the Blind, in collaboration with Western Reserve University, conducted in Cleveland in 1963. There, legally blind residents are offered vocational, recreational, and other special services by a local agency (the Cleveland Society for the Blind). Less severely impaired people have no such single agency concerned with problems stemming from their impairments; if they need help, they must obtain it from a large number of less specialized health and welfare agencies in the area. It is not surprising, therefore, that when asked to name "any agency or organization in Cleveland that provides services for people who have trouble seeing," the great majority of our respondents failed to mention the Cleveland Society for the Blind. More striking, half of our legally blind respondents failed to mention it—that is, they did not know of any institution offering services to them. However, when we subsequently asked, "Have you ever heard of the Cleveland Society for the Blind?" nine out of ten indicated that they had. In other words, most of the people in our sample did know of this agency, but *only* after having their memories refreshed.



## Chapter 7

1. See, for example, the recommendations submitted in 1960 to the Committee on Education and Labor, U. S. House of Representatives, *Services for Blind Persons in the United States* (New York: American Foundation for the Blind, 1960). For an authoritative presentation of the United States Government's views, see Wilbur Cohen, "The Role of the Service Agency," *The New Outlook for the Blind*, Vol. 55, No. 9, November, 1961.
2. A recent sample survey of men injured while working showed that most of them obtained new jobs or returned to their old ones without special assistance from rehabilitation agencies. As a matter of fact, four out of ten got better jobs than they had had before their injuries, but only one in ten had received any vocational training after the injury. See A. J. Jaffe *et al.*, *Disabled Workers in the Labor Market* (Totowa, N. J.: Bedminster Press, 1964).
3. Robert Scott has estimated that "70 percent of all blind persons (the elderly) are receiving less than 15 percent of the services, whereas 21 percent of blind persons (blind children) are getting over 20 percent of services." Our own study showed that persons 70 and over—approximately 40 percent of the total sample—represented nearly two thirds of the "unaided" group—that is, those who were not getting social and other services. See Robert A. Scott, "The Selection of Clients by Social Welfare Agencies: The Case of the Blind," *Social Problems*, Vol. 14, No. 3, Winter, 1967.
4. Scott estimates that 20 percent of all blind persons—those for whom employment might be feasible—receive over 50 percent of the services. *Ibid.*
5. Irving Miller. *Resistance to Cataract Surgery* (New York: American Foundation for the Blind, 1964), p. 103.
6. See Irving Lukoff on "traditional" and "rebellious" role types among the blind, in Samuel Finestone, ed., *Social Casework and Blindness* (New York: American Foundation for the Blind, 1960), pp. 36–40.
7. See Jacobus TenBroek and Floyd W. Matson, *Hope Deferred: Public Welfare and the Blind* (Berkeley and Los Angeles: University of California Press, 1959), Chaps. 3 and 8. On poverty in general, see Paul Jacobs, "America's Schizophrenic View of the Poor," *The Nation*, September 20, 1965.
8. Richard M. Titmuss. "The Role of Redistribution in Social Policy," *Social Security Bulletin*, June, 1965; also, Eveline M. Burns, "Where Welfare Falls Short," *The Public Interest*, Fall, 1965.
9. On the significance of the new Social Security Amendments (Medicare) for blind persons, see Irvin P. Schloss, "Up to Date in Legislation," *op. cit.*
10. I have discussed this at greater length in my paper, "Blind People

and the Market for Mobility Devices," in *Proceedings of the Rotterdam Mobility Research Conference* (New York: American Foundation for the Blind, 1965).

11. On future occupational trends see *Manpower Report of the President* (Washington, D. C., 1964), pp. 34-5.
12. For a contrary, more optimistic view, see Walter S. Neff, "Automation's Effect on the Handicapped Worker," *op. cit.*
13. As in the idea of a "negative income tax" for the poor. See Eveline M. Burns, "Where Welfare Falls Short," *op. cit.*; Oscar Gass, "The Political Economy of the Great Society," *Commentary*, October, 1965; Michael D. Regan, "For a Guaranteed Income," *New York Times Magazine*, June 7, 1964; and by the same author, "Washington Should Pay Taxes to the Poor," *ibid.*, February 20, 1966. Also see the recent report of the President's National Commission on Technology, Automation, and Economic Progress.
14. In the Soviet Union there is reportedly no unemployment among impaired persons of working age. But then, the Russians suffered gigantic losses of manpower during the last war. See Ruth V. Friedman, "Inside Russia Today: Preparing the Blind to Lead Useful Lives," *The New Outlook for the Blind*, Vol. 56, No. 9, November, 1962.
15. For recommendations regarding library services for the blind, see St. John, *Survey of Library Service for the Blind*, 1956, *op. cit.*
16. See *Proceedings of the International Congress on Technology and Blindness*, Vol. III (New York: American Foundation for the Blind, 1963).
17. For a discussion of the "minority parallel," see Hector Chevigny and Sydell Braverman, *The Adjustment of the Blind* (New Haven: Yale University Press, 1950), pp. 191 ff.
18. Irving F. Lukoff and Martin Whiteman. "Public Attitudes Toward Blindness," *The New Outlook for the Blind*, Vol. 56, No. 5, May, 1962.
19. Cf. Irving F. Lukoff, "A Sociological Appraisal of Blindness," in Finestone, ed., *Social Casework and Blindness*, *op. cit.*, p. 40.
20. Thomas D. Cutsforth, "Are We Truly Part of the Community?" *The New Outlook for the Blind*, Vol. 55, No. 4, April, 1961.
21. Edwin M. Lemert. *Social Pathology* (New York: McGraw-Hill, 1951), Chap. 5.
22. "The Limits of the Welfare State," *The Correspondent*, March-April, 1964.
23. See Arthur Pearl and Frank Riesman, *New Careers for the Poor* (New York: The Free Press, 1965).
24. Thomas D. Cutsforth, "Are We Truly Part of the Community?" *op. cit.*
25. See Murray E. Ortof, "Identification of Varied Needs of Blind Persons," *The New Outlook for the Blind*, October, 1964; and Donald V. Wilson, "Should the Disabled Be Segregated?" *The New Outlook for the Blind*, November, 1964.



26. See *Proceedings of the International Congress on Technology and Blindness*, Vol. I (New York: American Foundation for the Blind, 1963).
27. *Proceedings of the International Congress on Technology and Blindness*, Vol. II (New York: American Foundation for the Blind, 1963).

# Appendix A

## Tables

**Note:** Unless otherwise indicated, the source of data for the following tables is the AFB survey of 684 blind adults referred to in the text. (Methods of data collection are described in Appendix B.) Variations in base figures among the tables are due to the fact that not all respondents answered every question. In all tables, percentages are based on the actual number of persons reporting.

Table 1  
Age at Onset of Blindness and Present Age by Reported Visual Performance

| <i>Age at Onset of<br/>Blindness</i> | <i>Reported Visual Performance<br/>(in percent)</i> |                  |                     |                                   |                   |
|--------------------------------------|---|------------------|---------------------|-----------------------------------|-------------------|
|                                      | All blind<br>adults                                 | Totally<br>blind | Light<br>perception | Motion or<br>object<br>perception | Reading<br>vision |
| Under 3                              | 13  | 14               | 6                   | 10                                | 31                |
| 3-13                                 | 9   | 11               | 15                  | 5                                 | 12                |
| 14-59                                | 45  | 50               | 55                  | 41                                | 40                |
| 60 and over                          | 33  | 25               | 24                  | 44                                | 17                |
| TOTAL                                | 100   | 100              | 100                 | 100                               | 100               |
| <i>Present Age</i>                   |   |                  |                     |                                   |                   |
| 21-39                                | 17  | 16               | 17                  | 13                                | 39                |
| 40-64                                | 33  | 39               | 40                  | 29                                | 33                |
| 65 and over                          | 50  | 45               | 43                  | 58                                | 28                |
| TOTAL                                | 100   | 100              | 100                 | 100                               | 100               |
| Number of people                     | (684)   | (107)            | (100)               | (340)                             | (93)              |



Table 2  
Age at Onset of Trouble Seeing by Present Age (in percent)

| <i>Age at Onset of<br/>Trouble Seeing</i> | <i>Present Age</i> |       |       |       |       |             |
|---|--------------------|-------|-------|-------|-------|-------------|
|   | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Under 3                                   | 13                 | 43    | 15    | 7     | 5     | 1           |
| 3-13                                      | 8                  | 20    | 13    | 9     | 1     | —           |
| 14-39                                     | 21                 | 37    | 37    | 17    | 7     | 3           |
| 40-59                                     | 24                 | —     | 35    | 53    | 17    | 11          |
| 60 and over                               | 33                 | —     | —     | 14    | 70    | 82          |
| Don't know                                | 1                  | —     | —     | —     | —     | 3           |
| TOTAL                                     | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                          | (680)              | (115) | (168) | (126) | (151) | (120)       |

Table 3  
Blind Adults with Other Reported Chronic Conditions by Present Age  
(in percent)

| <i>Other Reported<br/>Chronic Conditions</i>      | <i>Present Age</i> |       |       |       |       |             |
|---|--------------------|-------|-------|-------|-------|-------------|
|   | All ages           | 20-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| With one or more<br>other chronic con-<br>ditions | 64                 | 42    | 61    | 73    | 68    | 75          |
| With no other chron-<br>ic conditions             | 35                 | 57    | 38    | 27    | 31    | 24          |
| No information                                    | 1                  | 1     | 1     | —     | 1     | 1           |
| TOTAL   | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                                  | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 4  
Self-Identification with Blindness by Age at Onset of Trouble Seeing  
(in percent)

| <i>Self-Identification<br/>with Blindness</i> | <i>All Persons</i> | <i>Age at Onset of Trouble Seeing</i> |      |       |       |             |
|---|--------------------|---------------------------------------|------|-------|-------|-------------|
|   |                    | Under                                 | 3-13 | 14-39 | 40-59 | 60 and over |
|   |                    | 3                                     |      |       |       |             |
| Consider self blind                           | 46                 | 50                                    | 55   | 58    | 44    | 39          |
| Do not consider self<br>blind                 | 51                 | 46                                    | 43   | 39    | 54    | 58          |
| Don't know                                    | 3                  | 4                                     | 2    | 3     | 2     | 3           |
| TOTAL   | 100                | 100                                   | 100  | 100   | 100   | 100         |
| Number of people                              | (684)              | (91)                                  | (58) | (142) | (163) | (226)       |

Table 5  
Self-Identification with Blindness and Ranking of Conditions by  
Reported Visual Performance (in percent)

| <i>Self-Identification<br/>with Blindness</i> | <i>Reported Visual Performance</i> |                  |                     |                      |                      |                   |
|---|------------------------------------|------------------|---------------------|----------------------|----------------------|-------------------|
|   | All<br>blind<br>adults             | Totally<br>blind | Light<br>perception | Motion<br>perception | Object<br>perception | Reading<br>vision |
| Consider self blind                           | 46                                 | 89               | 82                  | 43                   | 20                   | 18                |
| Do not consider self<br>blind                 | 51                                 | 9                | 16                  | 53                   | 79                   | 75                |
| Don't know                                    | 3                                  | 2                | 2                   | 4                    | 1                    | 7                 |
| TOTAL   | 100                                | 100              | 100                 | 100                  | 100                  | 100               |
| <i>Ranking of Conditions</i>                  |                                    |                  |                     |                      |                      |                   |
| Trouble seeing most<br>serious                | 29                                 | 21               | 22                  | 37                   | 30                   | 26                |
| Other conditions most<br>serious              | 63                                 | 73               | 71                  | 53                   | 61                   | 69                |
| Don't know                                    | 8                                  | 6                | 7                   | 10                   | 9                    | 5                 |
| TOTAL   | 100                                | 100              | 100                 | 100                  | 100                  | 100               |
| Number of people                              | (684)                              | (108)            | (102)               | (158)                | (184)                | (93)              |

Table 6  
Mode of Travel Reported in Two Studies of the Blind (in percent)

| <i>Mode of Travel</i>       | <i>Dog Guide Study<br/>(1957)</i> | <i>A FB Study<br/>(1961)</i> |
|-----------------------------|-----------------------------------|------------------------------|
| Travel unaided              | 42                                | 31                           |
| With help of sighted person | 32                                | 35                           |
| Cane                        | 19                                | 43                           |
| Dog                         | 6                                 | 1                            |
| Other                       | 1                                 | 3                            |
| Don't go out                | —                                 | 3                            |
| TOTAL                       | 100                               | 116                          |
| Number of people            | (500)                             | (684)                        |

NOTE: The first column shows the distribution of primary modes of travel in a sample of 500 blind persons age 15 to 54 in New York State and reported in Samuel Finestone, Irving F. Lukoff, and Martin Whiteman, *The Demand for Dog Guides*, New York, 1960. The second column shows the distribution of primary and secondary modes of travel (many blind persons use more than one) as reported in our study of a much older population; hence the figures add up to more than 100 percent.



Table 7  
Educational Attainment of Blind Adults in Six Areas (in percent)

| <i>Education</i> | <i>Johnston<br/>County,<br/>N. C.</i> | <i>Charlotte,<br/>N. C.</i> | <i>Essex<br/>County,<br/>N. J.</i> | <i>Portland,<br/>Ore.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Boston,<br/>Mass.</i> |
|------------------|---------------------------------------|-----------------------------|------------------------------------|---------------------------|--------------------------------------|--------------------------|
| Elementary       | 81                                    | 70                          | 59                                 | 39                        | 36                                   | 34                       |
| High school      | 11                                    | 22                          | 26                                 | 32                        | 42                                   | 41                       |
| College          | 8                                     | 8                           | 15                                 | 29                        | 22                                   | 25                       |
| TOTAL            | 100                                   | 100                         | 100                                | 100                       | 100                                  | 100                      |
| Number of people | (74)                                  | (122)                       | (183)                              | (177)                     | (156)                                | (152)                    |

NOTE: The source of data for Essex County, N.J., is an earlier (1960) AFB pilot study of 182 adults registered by the New Jersey Commission for the Blind.

Table 8  
Employment Status of Blind Persons by Present Age (in percent)

| <i>Employment Status</i>     | <i>Present Age</i> |       |       |             |
|------------------------------|--------------------|-------|-------|-------------|
|                              | 21-39              | 40-59 | 60-64 | 65 and over |
| Employed                     | 45                 | 38    | 18    | 9           |
| Unemployed, looking for work | 17                 | 13    | 5     | 3           |
| Not in labor force           | 38                 | 49    | 77    | 88          |
| TOTAL                        | 100                | 100   | 100   | 100         |
| Number of people             | (115)              | (168) | (61)  | (340)       |

Table 9  
Employment Status of Blind Persons 21-64 by Reported Visual Performance (in percent)

| <i>Employment Status</i>        | <i>Reported Visual Performance</i> |                                   |                |
|---------------------------------|------------------------------------|-----------------------------------|----------------|
|                                 | Totally blind-light<br>perception  | Motion or<br>object<br>perception | Reading vision |
| Employed                        | 38                                 | 30                                | 48             |
| Unemployed, looking for<br>work | 13                                 | 12                                | 16             |
| Not in labor force              | 49                                 | 58                                | 36             |
| TOTAL                           | 100                                | 100                               | 100            |
| Number of people                | (116)                              | (142)                             | (67)           |

Table 10  
Family Income in 1960 Reported by Blind Persons and by the Total Population in Five Areas (in percent)

| Family Income in<br>1960 | Johnston County,<br>N. C. |       | Charlotte, N. C. |       | Portland, Ore. |       | Boston, Mass. |       | Minneapolis,<br>Minn. |       |
|--------------------------|---------------------------|-------|------------------|-------|----------------|-------|---------------|-------|-----------------------|-------|
|                          | All persons               | Blind | All persons      | Blind | All persons    | Blind | All persons   | Blind | All persons           | Blind |
| Under \$2,000            | 42                        | 61    | 11               | 53    | 8              | 37    | 6             | 29    | 6                     | 30    |
| \$2,000-2,999            | 16                        | 4     | 10               | 11    | 6              | 10    | 5             | 5     | 5                     | 14    |
| \$3,000-3,999            | 13                        | 8     | 11               | 3     | 7              | 9     | 7             | 8     | 6                     | 11    |
| \$4,000-4,999            | 9                         | —     | 11               | 2     | 10             | 6     | 10            | 7     | 8                     | 10    |
| \$5,000-5,999            | 7                         | 1     | 11               | 4     | 14             | 4     | 14            | 4     | 13                    | 5     |
| \$6,000 and over         | 13                        | —     | 46               | 3     | 55             | 11    | 58            | 12    | 62                    | 15    |
| Don't know               | —                         | 25    | —                | 21    | —              | 20    | —             | 26    | —                     | 11    |
| Refused                  | —                         | 1     | —                | 3     | —              | 3     | —             | 9     | —                     | 4     |
| TOTAL                    | 100                       | 100   | 100              | 100   | 100            | 100   | 100           | 100   | 100                   | 100   |
| Number of people         | —                         | (75)  | —                | (122) | —              | (178) | —             | (152) | —                     | (157) |

SOURCE: U. S. Census of Population and Housing: 1960. Census Tracts, Final Report PHC (1)-18, 121, 93, 24, 1962 (U. S. Bureau of the Census, U. S. Government Printing Office, Washington, D. C.).  
U. S. Census of Population: 1960. General Social and Economic Characteristics, North Carolina, Final Report PC (1)-35C, 1961 (U. S. Bureau of the Census, U. S. Government Printing Office, Washington, D. C.).



Table 11  
Income by Labor Force Status (in percent)

| <i>Income</i>    | <i>Employed</i> | <i>Not Presently Employed</i> |                |         |                  |                  |           |
|------------------|-----------------|-------------------------------|----------------|---------|------------------|------------------|-----------|
|                  |                 | Total                         | Unable to work | Retired | Looking for work | Voluntarily idle | Housewife |
| Under \$1,000    | 9               | 20                            | 31             | 12      | 14               | 17               | 11        |
| \$1,000-1,999    | 18              | 23                            | 23             | 30      | 27               | 14               | 12        |
| \$2,000-3,999    | 22              | 16                            | 11             | 18      | 26               | 14               | 18        |
| \$4,000 and over | 38              | 14                            | 6              | 15      | 15               | 17               | 32        |
| Don't know       | 9               | 23                            | 27             | 18      | 14               | 31               | 23        |
| Refused          | 4               | 4                             | 2              | 7       | 4                | 7                | 4         |
| TOTAL            | 100             | 100                           | 100            | 100     | 100              | 100              | 100       |
| Number of people | (159)           | (525)                         | (211)          | (138)   | (52)             | (42)             | (74)      |

Table 12  
Income by Present Age (in percent)

| <i>Income</i>    | <i>Present Age</i> |       |       |       |             |
|------------------|--------------------|-------|-------|-------|-------------|
|                  | 21-39              | 40-59 | 60-69 | 70-79 | 80 and over |
| Under \$1,000    | 11                 | 17    | 21    | 17    | 22          |
| \$1,000-1,999    | 12                 | 18    | 30    | 28    | 18          |
| \$2,000-3,999    | 17                 | 22    | 14    | 17    | 14          |
| \$4,000 and over | 40                 | 22    | 15    | 10    | 13          |
| Don't know       | 16                 | 16    | 18    | 24    | 27          |
| Refused          | 4                  | 5     | 2     | 4     | 6           |
| TOTAL            | 100                | 100   | 100   | 100   | 100         |
| Number of people | (115)              | (168) | (126) | (150) | (124)       |

Table 13  
Living Arrangements by Present Age (in percent)

| <i>Living Arrangements</i> | <i>Present Age</i> |       |       |       |       |             |
|----------------------------|--------------------|-------|-------|-------|-------|-------------|
|                            | All blind persons  | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Live alone                 | 16                 | 6     | 10    | 19    | 20    | 26          |
| Live with others           | 78                 | 93    | 88    | 75    | 73    | 60          |
| In institutions            | 6                  | 1     | 2     | 6     | 7     | 14          |
| TOTAL                      | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people           | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 14  
Recreational Preferences by Present Age (in percent)\*

| <i>Recreational<br/>Preferences</i> | <i>Present Age</i> |       |       |       |       |             |
|-------------------------------------|--------------------|-------|-------|-------|-------|-------------|
|                                     | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Visit friends                       | 41                 | 54    | 42    | 40    | 41    | 29          |
| Listen to the radio                 | 28                 | 21    | 24    | 32    | 26    | 38          |
| Read a book                         | 18                 | 10    | 25    | 12    | 21    | 21          |
| Watch TV                            | 10                 | 12    | 8     | 12    | 9     | 8           |
| Other                               | 1                  | 1     | —     | 2     | 1     | 2           |
| Don't know                          | 2                  | 2     | 1     | 2     | 2     | 2           |
| TOTAL                               | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                    | (684)              | (115) | (168) | (126) | (151) | (124)       |

\* NOTE: Only one choice of recreation was permitted.

Table 15  
Time Spent Listening to Radio on Average Weekday by Reported  
Visual Performance (in percent)

| <i>Time Spent Listening<br/>to Radio</i> | <i>Reported Visual Performance</i> |                  |                     |                      |                      |                   |
|--|------------------------------------|------------------|---------------------|----------------------|----------------------|-------------------|
|  | All<br>blind<br>adults             | Totally<br>blind | Light<br>perception | Motion<br>perception | Object<br>perception | Reading<br>vision |
| Do not listen                            | 7                                  | 4                | 9                   | 4                    | 6                    | 13                |
| Under 1 hour                             | 18                                 | 9                | 19                  | 21                   | 21                   | 23                |
| 1 to 2 hours                             | 28                                 | 32               | 18                  | 28                   | 25                   | 29                |
| 2 to 4 hours                             | 22                                 | 21               | 23                  | 25                   | 25                   | 15                |
| 4 hours or more                          | 25                                 | 34               | 31                  | 22                   | 23                   | 20                |
| TOTAL                                    | 100                                | 100              | 100                 | 100                  | 100                  | 100               |
| Number of people                         | (677)                              | (108)            | (100)               | (158)                | (181)                | (92)              |



Table 16  
Time Spent Watching TV on Average Weekday by Reported Visual Performance (in percent)

| <i>Time Spent Watching<br/>TV on Average Weekday</i> | <i>Reported Visual Performance</i> |                     |                      |                      |                   |
|--|------------------------------------|---------------------|----------------------|----------------------|-------------------|
|  | Totally<br>blind                   | Light<br>perception | Motion<br>perception | Object<br>perception | Reading<br>vision |
| Do not watch   | 34                                 | 38                  | 33                   | 21                   | 14                |
| Under 1 hour   | 22                                 | 24                  | 16                   | 24                   | 18                |
| 1 to 2 hours   | 27                                 | 16                  | 22                   | 22                   | 27                |
| 2 to 4 hours   | 11                                 | 15                  | 20                   | 21                   | 25                |
| 4 hours or more                                      | 6                                  | 7                   | 9                    | 12                   | 16                |
| TOTAL  | 100                                | 100                 | 100                  | 100                  | 100               |
| Number of people                                     | (105)                              | (102)               | (156)                | (179)                | (90)              |

Table 17  
Time Spent Watching TV on Average Weekday by Present Age (in percent)

| <i>Time Spent Watching<br/>TV on Average<br/>Weekday</i> | <i>Present Age</i> |       |       |       |       |             |
|--|--------------------|-------|-------|-------|-------|-------------|
|  | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Do not watch   | 28                 | 12    | 18    | 30    | 31    | 50          |
| Under 1 hour   | 21                 | 19    | 24    | 21    | 19    | 20          |
| 1 to 2 hours   | 23                 | 24    | 30    | 23    | 20    | 18          |
| 2 to 4 hours   | 18                 | 33    | 18    | 16    | 18    | 10          |
| 4 hours or more  | 10                 | 12    | 10    | 10    | 12    | 2           |
| TOTAL  | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people   | (671)              | (112) | (164) | (126) | (147) | (122)       |

Table 18  
Time Spent Watching TV on Average Weekday by Age at Onset of Blindness (in percent)

| <i>Time Spent Watching<br/>TV on Average Weekday</i> | <i>Age at Onset of Blindness</i> |      |       |       |             |
|--|----------------------------------|------|-------|-------|-------------|
|  | Under 3                          | 3-13 | 14-39 | 40-59 | 60 and over |
| Do not watch   | 18                               | 19   | 19    | 31    | 37          |
| Under 1 hour   | 24                               | 25   | 21    | 18    | 20          |
| 1 to 2 hours   | 24                               | 31   | 23    | 25    | 20          |
| 2 to 4 hours   | 23                               | 11   | 31    | 14    | 14          |
| 4 hours or more                                      | 11                               | 14   | 6     | 12    | 9           |
| TOTAL  | 100                              | 100  | 100   | 100   | 100         |
| Number of people                                     | (88)                             | (57) | (139) | (163) | (220)       |

Table 19  
Visiting Friends by Present Age (in percent)

| <i>Amount of Visiting</i> | <i>Present Age</i> |       |       |       |       |             |
|---------------------------|--------------------|-------|-------|-------|-------|-------------|
|                           | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Do not visit              | 8                  | 4     | 6     | 8     | 11    | 11          |
| Less than 4 times a month | 32                 | 23    | 31    | 29    | 35    | 44          |
| 1 or 2 times a week       | 32                 | 44    | 33    | 29    | 32    | 20          |
| 3 or more times a week    | 28                 | 29    | 30    | 34    | 22    | 25          |
| TOTAL                     | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people          | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 20  
Membership in Clubs or Organizations, Visiting Friends, and Voting in Five Areas (in percent)

|   | <i>Johnston<br/>County,<br/>N. C.</i> | <i>Charlotte,<br/>N. C.</i> | <i>Boston,<br/>Mass.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Portland,<br/>Ore.</i> |
|---|---------------------------------------|-----------------------------|--------------------------|--------------------------------------|---------------------------|
| <i>Membership in Clubs or Organizations</i> |                                       |                             |                          |                                      |                           |
| Do not belong to clubs or organizations     | 79                                    | 66                          | 51                       | 39                                   | 29                        |
| Belong to clubs or organizations            | 21                                    | 34                          | 49                       | 61                                   | 71                        |
| TOTAL                                       | 100                                   | 100                         | 100                      | 100                                  | 100                       |
| <i>Amount of Visiting with Friends</i>      |                                       |                             |                          |                                      |                           |
| Do not visit                                | 1                                     | 7                           | 16                       | 4                                    | 8                         |
| Less than 4 times a month                   | 31                                    | 16                          | 34                       | 39                                   | 38                        |
| 1 or 2 times a week                         | 27                                    | 38                          | 29                       | 36                                   | 28                        |
| 3 or more times a week                      | 41                                    | 39                          | 21                       | 21                                   | 26                        |
| TOTAL                                       | 100                                   | 100                         | 100                      | 100                                  | 100                       |
| <i>Voting in 1960 Presidential Election</i> |                                       |                             |                          |                                      |                           |
| Did not vote                                | 68                                    | 67                          | 28                       | 27                                   | 37                        |
| Voted                                       | 32                                    | 33                          | 72                       | 73                                   | 63                        |
| TOTAL                                       | 100                                   | 100                         | 100                      | 100                                  | 100                       |
| Number of people                            | (75)                                  | (122)                       | (152)                    | (157)                                | (178)                     |



Table 21  
Membership in Clubs or Organizations by Present Age  
(in percent)

| <i>Membership in Clubs<br/>or Organizations</i> | <i>Present Age</i> |       |       |       |       |             |
|---|--------------------|-------|-------|-------|-------|-------------|
|   | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Do not belong to<br>clubs or organ-<br>izations | 56                 | 41    | 55    | 53    | 57    | 73          |
| Belong to clubs or<br>organizations             | 44                 | 59    | 45    | 47    | 43    | 27          |
| TOTAL   | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                                | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 22  
Social Isolation by Present Age (in percent)

| <i>Social Isolation</i> | <i>Present Age</i> |       |       |       |             |
|-------------------------|--------------------|-------|-------|-------|-------------|
|                         | All ages           | 21-39 | 40-69 | 70-79 | 80 and over |
| Most isolated           | 25                 | 11    | 21    | 29    | 41          |
| Moderately isolated     | 55                 | 59    | 58    | 52    | 49          |
| Least Isolated          | 20                 | 30    | 21    | 19    | 10          |
| TOTAL                   | 100                | 100   | 100   | 100   | 100         |
| Number of people        | (684)              | (115) | (294) | (151) | (124)       |

Table 23  
Social Isolation by Income (in percent)

| <i>Social Isolation</i> | <i>Income</i>    |                   |                   |                     |               |         |
|-------------------------|------------------|-------------------|-------------------|---------------------|---------------|---------|
|                         | Under<br>\$1,000 | \$1,000-<br>1,999 | \$2,000-<br>3,999 | \$4,000<br>and over | Don't<br>know | Refused |
| Most isolated           | 33               | 25                | 20                | 14                  | 36            | 10      |
| Moderately isolated     | 59               | 59                | 53                | 56                  | 49            | 52      |
| Least isolated          | 8                | 16                | 27                | 30                  | 15            | 38      |
| TOTAL                   | 100              | 100               | 100               | 100                 | 100           | 100     |
| Number of people        | (120)            | (147)             | (117)             | (135)               | (136)         | (29)    |

Table 24  
Social Activity Score by Present Age (in percent)

| <i>Social Activity Score</i> | <i>Present Age</i> |       |       |       |       |             |
|------------------------------|--------------------|-------|-------|-------|-------|-------------|
|                              | All ages           | 21-34 | 40-59 | 60-69 | 70-79 | 80 and over |
| Inactive                     | 15                 | 4     | 12    | 16    | 18    | 26          |
| Moderately active            | 64                 | 62    | 65    | 61    | 63    | 67          |
| Very Active                  | 21                 | 34    | 23    | 23    | 19    | 7           |
| TOTAL                        | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people             | (668)              | (113) | (163) | (123) | (146) | (123)       |

Table 25  
Social Activity Score by Reported Visual Performance  
(in percent)

| <i>Social Activity Score</i> | <i>Reported Visual Performance</i>   |                                   |                |
|------------------------------|--------------------------------------|-----------------------------------|----------------|
|                              | Totally blind or<br>light perception | Motion or<br>object<br>perception | Reading vision |
| Inactive                     | 17                                   | 15                                | 10             |
| Moderately active            | 65                                   | 64                                | 62             |
| Very active                  | 18                                   | 21                                | 28             |
| TOTAL                        | 100                                  | 100                               | 100            |
| Number of people             | (206)                                | (334)                             | (90)           |

Table 26  
Social Activity Score by Income (in percent)

| <i>Social Activity Score</i> | <i>Income</i>    |                   |                     |               |         |
|------------------------------|------------------|-------------------|---------------------|---------------|---------|
|                              | Under<br>\$1,000 | \$1,000-<br>3,999 | \$4,000<br>and over | Don't<br>know | Refused |
| Inactive                     | 25               | 12                | 8                   | 22            | 12      |
| Moderately active            | 64               | 66                | 59                  | 63            | 61      |
| Very active                  | 11               | 22                | 33                  | 15            | 27      |
| TOTAL                        | 100              | 100               | 100                 | 100           | 100     |
| Number of people             | (120)            | (256)             | (132)               | (134)         | (26)    |



Table 27  
Passive Recreation Score by Present Age (in percent)

| <i>Passive Recreation<br/>Score</i> | <i>Present Age</i> |       |       |       |       |             |
|-------------------------------------|--------------------|-------|-------|-------|-------|-------------|
|                                     | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Low                                 | 18                 | 5     | 12    | 17    | 21    | 35          |
| Moderate                            | 65                 | 64    | 67    | 61    | 64    | 59          |
| High                                | 17                 | 31    | 21    | 12    | 15    | 6           |
| TOTAL                               | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                    | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 28  
Passive Recreation Score by Social Isolation (in percent)

| <i>Passive Recreation<br/>Score</i> | <i>Social Isolation</i> |                     |                |
|-------------------------------------|-------------------------|---------------------|----------------|
|                                     | Most isolated           | Moderately isolated | Least isolated |
| Low                                 | 30                      | 16                  | 10             |
| Moderate                            | 63                      | 67                  | 62             |
| High                                | 7                       | 17                  | 28             |
| TOTAL                               | 100                     | 100                 | 100            |
| Number of people                    | (170)                   | (377)               | (137)          |

Table 29  
Passive Recreation Score by Income (in percent)

| <i>Passive Recreation<br/>Score</i> | <i>Income</i> |               |               |                  |            |         |
|-------------------------------------|---------------|---------------|---------------|------------------|------------|---------|
|                                     | Under \$1,000 | \$1,000-1,999 | \$2,000-3,999 | \$4,000 and over | Don't know | Refused |
| Low                                 | 37            | 17            | 10            | 6                | 24         | 7       |
| Moderate                            | 55            | 71            | 66            | 65               | 64         | 79      |
| High                                | 8             | 12            | 24            | 29               | 12         | 14      |
| TOTAL                               | 100           | 100           | 100           | 100              | 100        | 100     |
| Number of people                    | (120)         | (147)         | (117)         | (135)            | (136)      | (29)    |

Table 30  
Passive Recreation Score by Social Activity Score (in percent)

| <i>Passive Recreation<br/>Score</i> | <i>Social Activity Score</i> |                   |             |
|-------------------------------------|------------------------------|-------------------|-------------|
|                                     | Inactive                     | Moderately active | Very active |
| Low                                 | 35                           | 17                | 12          |
| Moderate                            | 59                           | 67                | 60          |
| High                                | 6                            | 16                | 28          |
| TOTAL                               | 100                          | 100               | 100         |
| Number of people                    | (103)                        | (424)             | (141)       |

Table 31  
Composite Activities Score by Present Age (in percent)

| <i>Composite Activities<br/>Score</i> | <i>Present Age</i> |       |       |       |       |             |
|---------------------------------------|--------------------|-------|-------|-------|-------|-------------|
|                                       | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| Low                                   | 21                 | 3     | 14    | 20    | 28    | 39          |
| Moderate                              | 63                 | 67    | 65    | 67    | 57    | 57          |
| High                                  | 16                 | 30    | 21    | 13    | 15    | 4           |
| TOTAL                                 | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                      | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 32  
Book Reading by Blind Adults in Seven Areas (in percent)

| <i>Number of Books<br/>Read in Past<br/>Month</i> | <i>Charlotte<br/>N. C.</i> | <i>Boston,<br/>Mass.</i> | <i>Essex<br/>County,<br/>N. J.</i> | <i>John-<br/>ston<br/>County,<br/>N. C.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Port-<br/>land,<br/>Ore.</i> | <i>Rural<br/>Utah</i> |
|---|----------------------------|--------------------------|------------------------------------|---|--------------------------------------|---------------------------------|-----------------------|
| None  | 67                         | 65                       | 64                                 | 57  | 43                                   | 40                              | 27                    |
| One   | 15                         | 10                       | 10                                 | 23  | 14                                   | 12                              | 20                    |
| 2 or 3  | 11                         | 15                       | 13                                 | 13  | 23                                   | 18                              | 22                    |
| 4 and over  | 7                          | 10                       | 11                                 | 7   | 20                                   | 30                              | 30                    |
| Don't know  | —                          | —                        | 2                                  | —   | —                                    | —                               | 1                     |
| TOTAL   | 100                        | 100                      | 100                                | 100   | 100                                  | 100                             | 100                   |
| Number of people                                  | (122)                      | (152)                    | (183)                              | (75)  | (157)                                | (178)                           | (100)                 |

NOTE: The source of data for Essex County, N. J., is an earlier (1960) AFB pilot study of 183 adults registered by the New Jersey Commission for the Blind; the source for Utah is the study by William M. McPhee and F. LeGrand Magleby, *Activities and Problems of the Rural Blind in Utah* (Salt Lake City: The University of Utah, 1963).



Table 33  
 Book Reading by Present Age (in percent)

| <i>Number of Books<br/>Read in Past<br/>Month</i> | <i>Present Age</i> |       |       |       |       |             |
|---|--------------------|-------|-------|-------|-------|-------------|
|   | All ages           | 21-39 | 40-59 | 60-69 | 70-79 | 80 and over |
| None  | 53                 | 41    | 62    | 50    | 54    | 54          |
| One   | 14                 | 20    | 8     | 17    | 11    | 16          |
| 2 to 3  | 16                 | 23    | 16    | 17    | 14    | 13          |
| 4 and over  | 17                 | 16    | 14    | 16    | 21    | 17          |
| TOTAL   | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people                                  | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 34  
 Book Reading by Parental Reading Habits (in percent)

| <i>Number of Books<br/>Read in Past<br/>Month</i> | <i>Parents were</i>            |                  |               |
|---|--------------------------------|------------------|---------------|
|   | Nonreaders or<br>light readers | Moderate readers | Heavy readers |
| None  | 68                             | 56               | 43            |
| One   | 13                             | 15               | 13            |
| 2 to 3  | 9                              | 16               | 21            |
| 4 and over  | 10                             | 13               | 23            |
| TOTAL   | 100                            | 100              | 100           |
| Number of people                                  | (146)                          | (236)            | (302)         |

Table 35  
 Primary Mode of Reading by Reported Visual Performance  
 (in percent)\*

| <i>Primary Mode of Reading</i> | <i>Reported Visual Performance</i>   |                                   |                |
|--------------------------------|--------------------------------------|-----------------------------------|----------------|
|                                | Totally blind or<br>light perception | Motion or<br>object<br>perception | Reading vision |
| Records                        | 54                                   | 63                                | 29             |
| Sighted reader                 | 25                                   | 24                                | 14             |
| Ordinary print                 | —                                    | 3                                 | 43             |
| Braille                        | 14                                   | 5                                 | 3              |
| Tapes                          | 1                                    | 1                                 | 2              |
| Don't know                     | 6                                    | 4                                 | 9              |
| TOTAL                          | 100                                  | 100                               | 100            |
| Number of people               | (126)                                | (179)                             | (58)           |

\* NOTE: Respondents who had read a book in the past six months.

Table 36  
Primary Mode of Reading by Present Age (in percent)

| <i>Primary Mode of Reading</i> | <i>Present Age</i> |       |       |             |
|--------------------------------|--------------------|-------|-------|-------------|
|                                | All ages           | 21-39 | 40-69 | 70 and over |
| Records                        | 54                 | 37    | 56    | 62          |
| Sighted reader                 | 23                 | 17    | 24    | 24          |
| Ordinary print                 | 9                  | 17    | 9     | 4           |
| Braille                        | 8                  | 20    | 8     | 2           |
| Tapes                          | 1                  | 1     | 1     | 1           |
| Don't know                     | 5                  | 8     | 2     | 6           |
| TOTAL                          | 100                | 100   | 100   | 100         |
| Number of people               | (378)              | (76)  | (157) | (145)       |

Table 37  
Primary Mode of Reading by Age at Onset of Blindness (in percent)

| <i>Primary Mode of Reading</i> | <i>Age at Onset of Blindness</i> |       |             |
|--------------------------------|----------------------------------|-------|-------------|
|                                | Under 13                         | 14-59 | 60 and over |
| Records                        | 42                               | 54    | 65          |
| Sighted reader                 | 11                               | 28    | 23          |
| Ordinary print                 | 19                               | 7     | 3           |
| Braille                        | 22                               | 6     | 1           |
| Tapes                          | —                                | 1     | 2           |
| Don't know                     | 6                                | 5     | 6           |
| TOTAL                          | 100                              | 100   | 100         |
| Number of people               | (88)                             | (167) | (120)       |

Table 38  
Book Reading by Primary Mode of Reading (in percent)

| <i>Number of Books Read in Past Month</i> | <i>Primary Mode of Reading</i> |         |       |         |                |                |
|---|--------------------------------|---------|-------|---------|----------------|----------------|
|   | All modes                      | Records | Tapes | Braille | Sighted reader | Ordinary print |
| One                                       | 29                             | 14      | 35    | 32      | 59             | 50             |
| 2 to 3                                    | 35                             | 33      | 20    | 52      | 33             | 46             |
| 4 and over                                | 36                             | 53      | 45    | 16      | 8              | 4              |
| TOTAL                                     | 100                            | 100     | 100   | 100     | 100            | 100            |
| Number of people                          | (318)                          | (181)   | (20)  | (25)    | (66)           | (26)           |



Table 39  
Blind Adults Receiving Selected Services from Public and Private  
Agencies in Five Areas (in percent)\*

| <i>Type of Service</i>                         | <i>All areas</i> | <i>Boston,<br/>Mass.</i> | <i>Portland,<br/>Ore.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Charlotte,<br/>N. C.</i> | <i>Johnston<br/>County,<br/>N. C.</i> |
|--|------------------|--------------------------|---------------------------|--------------------------------------|-----------------------------|---------------------------------------|
| Medical treatment                              | 32               | 24                       | 21                        | 33                                   | 45                          | 44                                    |
| Visits from a case-<br>worker                  | 30               | 27                       | 14                        | 10                                   | 51                          | 81                                    |
| Vocational training<br>or counseling           | 24               | 20                       | 17                        | 38                                   | 25                          | 16                                    |
| Help with schooling                            | 20               | 12                       | 14                        | 38                                   | 16                          | 19                                    |
| Glasses or optical<br>aids                     | 16               | 9                        | 6                         | 15                                   | 31                          | 31                                    |
| Travel training or<br>help with travel-<br>ing | 15               | 16                       | 6                         | 25                                   | 13                          | 13                                    |
| Help with house-<br>work or shopping           | 5                | 6                        | 2                         | 7                                    | 5                           | 5                                     |
| None of the above                              | 17               | 26                       | 25                        | 15                                   | 6                           | 3                                     |
| Number of people                               | (684)            | (152)                    | (178)                     | (157)                                | (122)                       | (75)                                  |

\* NOTE: Percentages add up to more than 100 because some people receive more than one type of service.

Table 40  
Number of Services Received from Agencies in Five Areas  
(in percent)

| <i>Number of Services Re-<br/>ceived from Public or<br/>Private Agencies</i> | <i>Boston,<br/>Mass.</i> | <i>Portland,<br/>Ore.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Charlotte,<br/>N. C.</i> | <i>Johnston<br/>County,<br/>N. C.</i> |
|--|--------------------------|---------------------------|--------------------------------------|-----------------------------|---------------------------------------|
| None   | 26                       | 25                        | 15                                   | 6                           | 3                                     |
| Few (1-3)  | 56                       | 58                        | 50                                   | 60                          | 70                                    |
| Many (4 or more)   | 18                       | 17                        | 34                                   | 34                          | 27                                    |
| TOTAL  | 100                      | 100                       | 100                                  | 100                         | 100                                   |
| Number of people   | (152)                    | (178)                     | (157)                                | (122)                       | (75)                                  |

Table 41  
Number of Services Received from Agencies by Present Age  
(in percent)

| <i>Number of Services<br/>Received from Public<br/>or Private Agencies</i> | <i>Present Age</i> |       |       |       |       |             |
|--|--------------------|-------|-------|-------|-------|-------------|
|  | All ages           | 21-34 | 40-59 | 60-69 | 70-79 | 80 and over |
| None   | 17                 | 4     | 12    | 16    | 25    | 27          |
| Few (1-3)  | 58                 | 41    | 48    | 67    | 65    | 68          |
| Many (4 or more)   | 25                 | 55    | 40    | 17    | 10    | 5           |
| TOTAL  | 100                | 100   | 100   | 100   | 100   | 100         |
| Number of people   | (684)              | (115) | (168) | (126) | (151) | (124)       |

Table 42  
Number of Services Received from Agencies by Age at Onset of  
Blindness (in percent)

| <i>Number of Services Re-<br/>ceived from Public or<br/>Private Agencies</i> | <i>Age at Onset of Blindness</i> |       |             |
|--|----------------------------------|-------|-------------|
|  | Under 14                         | 14-54 | 60 and over |
| None   | 7                                | 15    | 26          |
| Few (1-3)  | 46                               | 55    | 68          |
| Many (4 or more)   | 47                               | 30    | 6           |
| TOTAL  | 100                              | 100   | 100         |
| Number of people   | (149)                            | (306) | (224)       |

Table 43  
Self-Identification with Blindness by Number of Services Received  
from Agencies (in percent)

| <i>Self-Identification with<br/>Blindness</i> | <i>Number of Services Received from Agencies</i> |           |                     |
|---|--|-----------|---------------------|
|   | None   | Few (1-3) | Many<br>(4 or more) |
| Consider self blind                           | 28   | 46        | 61                  |
| Do not consider self blind                    | 67   | 52        | 36                  |
| Don't know                                    | 3  | 2         | 3                   |
| TOTAL   | 100  | 100       | 100                 |
| Number of people                              | (117)  | (394)     | (173)               |



Table 44

Number of Services Received from Agencies by Social Isolation  
(in percent)

| <i>Number of Services<br/>Received from Public<br/>or Private Agencies</i> | <i>Social Isolation</i> |                     |                |
|--|-------------------------|---------------------|----------------|
|  | Most isolated           | Moderately isolated | Least isolated |
| None   | 30                      | 13                  | 12             |
| Few (1-3)  | 54                      | 60                  | 55             |
| Many (4 or more)   | 16                      | 27                  | 33             |
| TOTAL  | 100                     | 100                 | 100            |
| Number of people   | (170)                   | (377)               | (137)          |

Table 45

Number of Services Received from Agencies by Composite Activities  
Score (in percent)

| <i>Number of Services<br/>Received from Public<br/>or Private Agencies</i> | <i>Composite Activities Score</i> |                             |                |
|--|-----------------------------------|-----------------------------|----------------|
|  | Inactive (0-8)                    | Moderately active<br>(9-14) | Active (15-21) |
| None   | 27                                | 17                          | 4              |
| Few (1-3)  | 65                                | 55                          | 58             |
| Many (4 or more)   | 8                                 | 23                          | 38             |
| TOTAL  | 100                               | 100                         | 100            |
| Number of people   | (142)                             | (429)                       | (113)          |

Table 46  
Reported Need for Help in Five Areas (in percent)\*

| <i>Reported Need for Help</i> | <i>Portland,<br/>Ore.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Boston,<br/>Mass.</i> | <i>Johnston<br/>County,<br/>N. C.</i> | <i>Charlotte<br/>N. C.</i> |
|-------------------------------|---------------------------|--------------------------------------|--------------------------|---------------------------------------|----------------------------|
| Need nothing                  | 70                        | 56                                   | 49                       | 39                                    | 31                         |
| Financial aid                 | 6                         | 8                                    | 12                       | 16                                    | 20                         |
| Medical aid                   | 6                         | 8                                    | 5                        | 15                                    | 19                         |
| Help with household work      | 6                         | 9                                    | 11                       | 5                                     | 7                          |
| Finding work                  | 5                         | 11                                   | 8                        | 7                                     | 7                          |
| Talking books                 | 2                         | 2                                    | 4                        | 9                                     | 7                          |
| Volunteer readers             | 4                         | 3                                    | 7                        | 1                                     | 1                          |
| Learning new skills           | 2                         | 3                                    | 4                        | 3                                     | 4                          |
| Other                         | 1                         | 2                                    | 3                        | —                                     | 2                          |
| Don't know                    | 2                         | 3                                    | 7                        | 12                                    | 10                         |
| Number of people              | (178)                     | (157)                                | (152)                    | (75)                                  | (122)                      |

\* NOTE: Percentages add up to more than 100 because some people need more than one kind of help.

Table 47  
Types of Financial Assistance Received in Five Areas (in percent)\*

| <i>Types of Financial<br/>Assistance</i> | <i>Johnston<br/>County,<br/>N. C.</i> | <i>Charlotte,<br/>N. C.</i> | <i>Boston,<br/>Mass.</i> | <i>Minn-<br/>neapolis,<br/>Minn.</i> | <i>Portland,<br/>Ore.</i> |
|--|---------------------------------------|-----------------------------|--------------------------|--------------------------------------|---------------------------|
| Aid to the Blind                         | 73                                    | 34                          | 30                       | 27                                   | 10                        |
| Social Security (OASDI)                  | 11                                    | 20                          | 30                       | 15                                   | 40                        |
| Old Age Assistance                       | 4                                     | 17                          | 3                        | 3                                    | 4                         |
| Veterans' pension                        | 1                                     | 3                           | 3                        | 4                                    | 3                         |
| Other public assistance                  | 3                                     | 10                          | —                        | 1                                    | 3                         |
| Other assistance                         | 4                                     | 7                           | 7                        | 7                                    | 6                         |
| Don't know                               | —                                     | —                           | 1                        | —                                    | 1                         |
| No Assistance                            | 15                                    | 23                          | 40                       | 54                                   | 42                        |
| Number of people                         | (75)                                  | (122)                       | (151)                    | (157)                                | (178)                     |

\* NOTE: Percentages add up to more than 100 because some people receive more than one type of assistance.





# Appendix B

## Methods

### *THE INTERVIEWS*

Field work on this study was conducted during the spring and summer of 1961. Interviewing procedures had been pretested a year earlier with a sample of 183 adult blind residents of Essex County, N. J. (Newark and its environs) who were then registered by the New Jersey State Commission for the Blind. The final questionnaire appears in Appendix C. (In 1962, this questionnaire was also used in a separate study conducted by the University of Utah School of Social Work with a sample of 100 blind persons between 21 and 79 years of age in rural Utah; findings from the Utah survey, including comparisons with the AFB study, are reported in William M. McPhee and F. LeGrand Magleby, *Activities and Problems of the Rural Blind in Utah* [Salt Lake City: University of Utah, 1963].) Responsibility for recruiting and training interviewers, conducting nearly 700 interviews with blind adults in five scattered regions of the nation, and preliminary tabulations of data was assigned to ARB Surveys, Inc., of New York City. Each interview, which included open-ended as well as structured questions, required more than one hour to complete and most respondents were extremely cooperative. Our greatest problem was not persuading them to give us information but finding them, as will be seen below.

### *SAMPLING PROCEDURES*

Sampling blind people, or any other group with a rare condition, presents many problems to the investigator.<sup>1</sup> One, just noted, is that they are relatively few in number and scattered throughout the unimpaired population. Another problem is that while some blind persons are known to public or private welfare agencies because of the services they receive, others remain

<sup>1</sup> I have discussed some of them in a paper, "Problems in Studying Blind People," in *Proceedings of the Third Annual Conference of the Model Reporting Area for Blindness Statistics, 1964* (Bethesda, Md.: U. S. Department of Health Education and Welfare, Public Health Service, 1965).



“hidden” from view to all but their physicians or family members. These obstacles are not easily overcome.

The ideal technique for finding blind persons would involve screening the total population (impaired and unimpaired) in a given area to determine the presence or absence of visual disorders; while yielding a representative sample of the blind, this method is prohibitively expensive since many thousands of persons would have to be screened in order to produce an appreciable number of blind people.<sup>2</sup>

For reasons of convenience and economy, therefore, most studies of legally blind people have relied on lists or registers which are maintained by private or public agencies serving them. This was the procedure that we followed. Any sample drawn from such a frame is, of course, no more reliable than the list or register itself; until fairly recently these rosters left much to be desired. The recent movement to systematize and standardize state registration data (the Model Reporting Area for Blindness Statistics) promises ultimately to be of considerable aid to investigators of blindness; twelve states have already joined the Reporting Area and more are in the process of joining.<sup>3</sup> But since some blind people regard their registration as stigmatizing and refuse to permit it, it is doubtful whether registers can ever be complete; even at best they will be an imperfect source from which to draw samples of the blind.

At the time we conducted our study (1961), only two or three states had developed relatively complete registers of their blind residents. While a nationwide survey was out of the question, we hoped to include states in more than one section of the nation in order to measure suspected regional differences in the social status and welfare of the blind. Most previous studies had been limited to the residents of one city or of one state; so far as I know, ours was the first to be conducted in more than one state.<sup>4</sup>

As it turned out, our selection of sampling areas was governed by the quality of state registers at the time and the willingness of states to help us contact or reach their clients. Early in 1961, we were successful in obtaining the cooperation of official agencies for the blind in four states: Massachusetts, North Carolina, Minnesota, and Oregon (roughly representing the northeast, south, midwest, and far west). Only the first two then had fairly complete and up-to-date registers. Each of these states agreed to permit us to draw samples of blind respondents from their registers.

Our resources did not allow us to undertake statewide sampling; as a

<sup>2</sup> For a description of such a study, in which a screening of more than 7,000 persons yielded only 14 blind people, see my report, “A Pilot Study of Visual Impairment,” in *Proceedings of the Symposium on Research in Blindness and Severe Visual Impairment* (New York: American Foundation for the Blind, 1964).

<sup>3</sup> See Hyman Goldstein, “The Blindness Register as a Research Tool,” *Public Health Reports*, Vol. 79, April, 1964.

<sup>4</sup> A more recent study of blind war veterans, conducted by the American Foundation for the Blind, was based on samples in eight states.

result, we decided to limit ourselves chiefly to several large metropolitan areas where we had reason to believe that blind people were concentrated. The cities selected were Boston, Charlotte, Minneapolis, and Portland; we supplemented this choice of urban centers with one rural area in North Carolina—Johnston County, in the central part of the state.

The first step in our sampling operation was to draw from the state registers the names of all blind persons living in these five areas.<sup>5</sup> The second step was to screen out the names of persons who had died or moved, those under the age of 21, psychiatric cases, and so on. As will be seen shortly, we were not entirely successful in this screening operation.

At this point, we were prepared to randomly draw names of adults to be interviewed. Each of the four state agencies had stipulated that prospective respondents be sent letters signed by the respective agency directors requesting *written permission* for us to send interviewers to their homes. We were not permitted to contact those who failed to signify their willingness to be interviewed by returning postcards which had been enclosed with the letters sent to them. Hence, an important selective factor entered into our sampling frame—that is, we could only interview blind adults who had indicated that they were willing to be contacted.

Our experiences in contacting prospective respondents for interviews were far from satisfactory. (See Table B-1.) In the five areas selected, 1,552 mail contacts were attempted with samples of adults from the respective state blindness registers; the 684 interviews we obtained yielded a completion rate of only 44 percent (in Minneapolis it was only 31 percent). This extremely low completion rate was due partly to the backward state of the blindness registers at the time (thus in Minneapolis 30 percent of all those we attempted to contact had moved since they were first registered and could not be traced). Even more important was the high rate of refusals to be interviewed; 23 percent of all those with whom we attempted contact refused or failed to return postcards indicating their willingness to be interviewed. However, not all of them were refusals in the ordinary sense of the word; that is, many were probably unable to get help in reading the letter which had been sent them by their state agencies or in returning the postcard to us.<sup>6</sup> It is doubtful whether so many would have declined to

<sup>5</sup> Actually, because of its size, only part of metropolitan Boston was sampled.

<sup>6</sup> We experienced similar difficulties in our 1960 pretest. Letters were sent out in December, 1959, by the New Jersey State Commission to every other blind person over the age of 19 who was then listed in the Commission's registry for Essex County. A total of 652 letters were mailed. The letters requested that recipients grant us interviews and cards were enclosed on which they could indicate their willingness or unwillingness to be interviewed. Of the 652 letters sent out, 157, or 24 percent, were returned to the Commission undelivered (because their intended recipients were deceased or had moved out of the state); 422 persons, or 65 percent, presumably had the letters delivered to them (or to other persons with whom they were living) but did not return the cards which



cooperate if we had been able to send interviewers directly to their homes without being required to correspond with them first. In any case, many substitutions had to be made in each of the five areas for those who were either disqualified or unwilling to be interviewed.

The low completion rate in the five areas raises obvious questions about the representativeness of our final samples of blind respondents. To answer such questions, we attempted to obtain some data on a small number of nonrespondents and in two of the states selected for study we were able to compare certain characteristics of our respondents with all blind adults registered by those states.

Although we of course could not learn anything about most of the blind persons whom we had failed to contact, we were successful in obtaining a limited amount of demographic data (from neighbors or over the telephone with nonrespondents themselves) about 108 persons who were not interviewed. Some of them had moved from the addresses at which they had been registered; others were physically or mentally incapable of granting interviews. In general, they were much older than the 684 whom we successfully interviewed (32 percent were 80 and over as compared with only 18 percent of our completed sample), lower in educational achievement, and lower too in visual performance (34 percent were reported to be totally blind as against only 16 percent of those we finally interviewed). Their

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were enclosed with the letters; and only 73, or 11 percent, returned cards indicating their willingness to be interviewed. Since our aim was to complete approximately 200 interviews in this pretest, the yield from the mailing of letters was inadequate. Therefore we obtained the Commission's permission to send interviewers directly to the addresses of blind adults who had presumably received the letter but had not returned the card. Altogether 188 interviews were completed.

Several conclusions were drawn from our earlier experience in trying to obtain respondents through the mail. First, the list provided us was out of date, since nearly a quarter of the basic sample could not be reached by letter. Second, it was unrealistic to expect that many blind people could cope with the problem of returning cards sent with letters (even though the cards were self-addressed and stamped). Thus, among our respondents who had presumably received the letter from the Commission, nearly half were unable to return the card. Third, many blind people have no way of handling incoming mail, let alone sending mail out: one quarter of those we finally interviewed claimed that they had never received the letters we sent them. In short, since only 15 percent of those who received the letters were able to return the cards, we would have had to send out many more letters than we did originally in order to reach the desired quota of 200 completed interviews. It is the extreme dependence of so many blind people on others to handle mail communications with them that complicates any research depending on written messages from prespective respondents. Our experience in Essex County suggested that direct, face-to-face contact with blind people is the most effective way of obtaining their cooperation as respondents.

Table B-1  
Contacting Respondents from State Blindness Registers (1961)

|   | Total   |    | Minneapolis |    | Boston |    | Portland, Ore. |    | Charlotte, N. C. |    | Johnston County, N. C. |    |
|---|---------|----|-------------|----|--------|----|----------------|----|------------------|----|------------------------|----|
|   | No.     | %  | No.         | %  | No.    | %  | No.            | %  | No.              | %  | No.                    | %  |
| Completed interviews                    | (684)   | 44 | (157)       | 31 | (152)  | 43 | (178)          | 51 | (122)            | 56 | (75)                   | 64 |
| Refused                                 | (355)   | 23 | (129)       | 25 | (91)   | 26 | (80)           | 23 | (42)             | 19 | (13)                   | 11 |
| Deceased                                | (86)    | 6  | (32)        | 6  | (11)   | 3  | (26)           | 7  | (12)             | 6  | (5)                    | 4  |
| Moved, unable to locate                 | (269)   | 17 | (154)       | 30 | (21)   | 6  | (60)           | 17 | (24)             | 11 | (10)                   | 9  |
| Physically or emotionally incapacitated | (67)    | 4  | (12)        | 2  | (36)   | 11 | (7)            | 2  | (10)             | 5  | (2)                    | 2  |
| Temporarily absent from home            | (50)    | 3  | (14)        | 3  | (24)   | 8  | —              | —  | (2)              | 1  | (10)                   | 9  |
| Other (e.g., not blind)                 | (13)    | 1  | (4)         | 1  | (7)    | 2  | —              | —  | (2)              | 1  | —                      | —  |
| No information                          | (28)    | 2  | (5)         | 1  | (17)   | 1  | —              | —  | (4)              | 2  | (2)                    | 2  |
| Total contacts attempted                | (1,552) |    | (507)       |    | (359)  |    | (351)          |    | (218)            |    | (117)                  |    |



much greater age and presumably poorer health no doubt help to explain their unwillingness or inability to cooperate with our interviewers.

How representative were our 684 respondents of the registered populations from which they had been drawn? As noted earlier, our original sampling frame consisted *only* of blind people known to and listed by their respective state agencies. We had no way of determining whether significant numbers and types of blind people were excluded from these registers. Since no data were available from the registers in either Oregon or Minnesota, we can make no statement about the representativeness of our samples in these states. In Massachusetts statistics were available for the state as a whole but not for Boston separately; only in North Carolina did we have access to data on the specific areas we had sampled.

Table B-2 compares two characteristics of our Boston sample—age and sex—with those of all blind registrants in Massachusetts. Whether our metropolitan Boston sample was representative of all blind adults residing in that area we do not know; but as the table indicates, our sample closely matched the state’s total registered population with respect to the two characteristics of age and sex.

North Carolina compiles a greater variety of statistical information on its registered blind population; it also provides breakdowns for every county in the state. Table B-3 compares several characteristics of our sample populations in two sections of North Carolina with those of all blind adults registered by the state in each of the areas.

Table B-2  
Percent Distribution of All Blind Persons 20 and over on Massachusetts Register (1960) and of Metropolitan Boston Sample Population by Age and Sex\*

|                  | <i>All Persons 20 and<br/>over on State Register</i> | <i>Metropolitan Boston<br/>Sample</i> |
|------------------|--|---------------------------------------|
| <i>Age</i>       |  |                                       |
| 20–39            | 13   | 11                                    |
| 40–59            | 23   | 24                                    |
| 60–69            | 19   | 20                                    |
| 70–79            | 22   | 24                                    |
| 80 and over      | 22   | 21                                    |
| Unknown          | 1  | —                                     |
| <i>Sex</i>       |  |                                       |
| Male             | 47   | 48                                    |
| Female           | 53   | 52                                    |
| Number of people | (7,344)  | (152)                                 |

\* *Annual Report, 1960, Division of the Blind, Massachusetts Department of Education.*

Table B-3  
 Percent Distribution of All Registered Blind Persons 20 and over  
 (1960–1962) and of Sample Populations in Charlotte and  
 Johnston County by Age, Sex, Age at Onset of  
 Blindness, and Race<sup>a</sup>

|  | Charlotte       |        | Johnston County |        |
|--|-----------------|--------|-----------------|--------|
|  | All on register | Sample | All on register | Sample |
| <i>Age</i>                                       |                 |        |                 |        |
| 20–64  | 55              | 56     | 48              | 54     |
| 65 and over                                      | 45              | 44     | 52              | 46     |
| <i>Sex</i>                                       |                 |        |                 |        |
| Male   | 44              | 52     | 52              | 52     |
| Female   | 56              | 48     | 48              | 48     |
| <i>Race</i>                                      |                 |        |                 |        |
| White  | 55              | 53     | 72              | 67     |
| Negro  | 45              | 47     | 28              | 33     |
| Number of people                                 | (482)           | (122)  | (118)           | (75)   |
| <i>Age at onset of<br/>Blindness<sup>b</sup></i> |                 |        |                 |        |
| 20–64  | 79              | 68     | 56              | 71     |
| 65 and over                                      | 21              | 32     | 43              | 27     |
| Unknown  | —               | —      | 1               | 2      |
| Number of people                                 | (371)           | (90)   | (86)            | (55)   |

<sup>a</sup> *Biennial Report of the North Carolina State Commission for the Blind, July 1, 1960–June 30, 1962.*

<sup>b</sup> Data are shown only for those blinded at age 20 and over, since register reports on those who lost their sight earlier in life are not comparable with information obtained from sample respondents; hence the smaller bases.

As the table above shows, our sample in Charlotte closely matched the register with regard to age and race, but not sex and age at onset of blindness. In Johnston County our sample matched the register on sex, corresponded fairly well with regard to age and race, but matched poorly on age at onset of blindness. This is not conclusive evidence that our samples were unrepresentative; the reliability of state registration data at that time is open to question.

Apart from the matching of sample and register data in the areas where this could be done, there is the question of differences in characteristics between the five sample populations themselves. Some of these demographic differences have been discussed at length in the text of the report. Thus, we found wide variation among the five areas in family income, educational



achievement, and help patterns, which suggests considerable heterogeneity in the opportunities available to blind persons in different parts of the United States.

We also found considerable variation among our five sample populations with regard to such characteristics as age and vision. To illustrate, the proportion of each sample between the ages of 20 and 39 ranged from 11 percent in Boston to 23 percent in Minneapolis. Regarding the very oldest—those 80 and over—28 percent of our Portland sample but only 9 percent of the Minneapolis sample were in this age group. As for reported visual performance, there were a disproportionately large number of totally blind in our Boston and Minneapolis samples and relatively few in Portland and Charlotte. At the other extreme of visual performance, there were a disproportionately large number of persons with reading vision in our Charlotte sample and disproportionately few in Minneapolis. In other words, respondents in the Charlotte and Portland samples reported somewhat more vision than those of Boston and Minneapolis.

Some of these differences among the five samples may be attributed to their small size and to the resulting high sampling variation; others to the many selective factors which entered into the sample—for example, the high refusal rate in certain of the areas. However, even if these errors could have been reduced, there are no grounds for assuming that blind residents of the five areas we sampled form a truly homogeneous population; on the contrary, there is good reason to believe that they do not and that some of the demographic differences reported above reflect true differences in the characteristics and status of the blind in these areas.<sup>7</sup>

Are we then justified in combining data from our five samples? It could very well be argued that we have five separate samples and that any combination of data from them is statistically dangerous. Indeed, where area differences turned out to be particularly significant, as for example in the case of income, social participation, reading, getting help—we have presented them separately. Thus, to take another example which we have not shown in the tables, self-identification with the blind corresponded fairly well with area differences in reported visual performance—that is, in Portland and Charlotte, where disproportionately large numbers of respondents reported useful vision, relatively few regarded themselves as blind; conversely, in Minneapolis, with the largest proportion of totally sightless, more identified themselves with the blind.

However, presentations of such differences among the five areas for every correlation would have been extremely cumbersome. Therefore, partly for the sake of simplicity and convenience, I have combined data from what were actually five independent sample surveys. Even more

<sup>7</sup> Further and more recent evidence of interstate differences in such characteristics as age and visual acuity may be seen in the *1964 Statistical Report of the Model Reporting Area for Blindness Statistics* (Washington: U.S. Department of Health, Education, and Welfare, Public Health Service, 1966).



important, while the five differ in many of their characteristics, it seems reasonable to assume that the totally blind as a group—to take one example—share many of the same problems of adjustment to their impairment whether they live in Charlotte or in Portland. Similar considerations apply to those over 65 or to persons who were born blind. This, in my opinion, is the ultimate justification for consolidating data from the five sampling points.

Nevertheless, in view of the many selective factors which entered into our five samples and the fairly significant demographic differences between them, extreme caution should be exercised in interpreting results from this study. Our 684 respondents should not be regarded as a representative sample of the total American adult blind population, but only as a crude approximation of such a cross-section. Just how crude is a reflection of the still primitive state of our knowledge about blindness and of our techniques for studying people who experience it.

Indeed, if there is any lesson to be learned from our sampling experiences in this study, it may be that since a nationwide sample of the blind is presently out of the question and the effort to find blind people in scattered parts of the nation is not commensurate with the returns, future investigators would be well advised to limit themselves to a single metropolitan area or to one state—at least until such time as the movement to standardize and improve statewide blindness reporting procedures is further advanced. In the final analysis, the difficulties which we encountered in finding blind respondents are inseparable from the stigma attached to blindness; when that stigma disappears, sampling the blind will be no more complex than sampling the sighted. But by that time special studies of the blind will be unnecessary.

## SCORES

Of the various scores or indices of behavior which were developed in the analysis of data from this study, I shall here describe only those regarding vision, social isolation, social activity, passive recreation, and getting help.

a. *Vision.* As noted earlier in the text, we were unable to obtain up-to-date clinical data about the visual acuity of our respondents. The interviews included a simple test of their near vision, but we lacked the resources to obtain clinical validations of these tests. Furthermore, since the visual acuity data in the files of the state agencies for the blind were often incomplete or out of date, the only alternative was to rely on self-reporting of visual performance (by those with some remaining vision). The model for this approach was originally developed by a team of investigators at the Columbia School of Social Work who were engaged in a study of travel adjustment among blind adults.<sup>8</sup> We adopted their scale of self-reported “visual per-

<sup>8</sup> Samuel Finstone, Irving F. Lukoff, and Martin Whiteman, *The Demand for Dog Guides* (New York: Research Center, Columbia University School of Social Work, 1960), p. 115.



ception” in our study. Such self-reports reveal how blind people themselves perceive their relative loss of vision—which may be just as important functionally as what clinical measurements show.

| <i>Percent<br/>Distribution</i> | <i>Visual Perception Score (self-reported)</i>  |
|---------------------------------|---|
| 15.8                            | 1. <i>Totally blind.</i> Can't tell night from day, or tell if a light is on.   |
| 14.9                            | 2. <i>Light perception.</i> Can only see light or can see more than light but <i>cannot</i> see moving objects such as cars, recognize the features of people they know, or read ordinary newspaper, book, or magazine print. |
| 23.1                            | 3. <i>Motion perception.</i> Can perceive the movement of objects, but <i>cannot</i> recognize the features of people they know, or read ordinary newspaper, book, or magazine print.   |
| 26.9                            | 4. <i>Object perception.</i> Can perceive the movement of objects and recognize the features of people they know, but cannot read ordinary newspaper, book, or magazine print.  |
| 13.6                            | 5. <i>Reading vision.</i> Can read all ordinary print (with or without optical aids), perceive the movement of objects, and recognize the features of people they know.   |
| 5.7                             | 6. <i>Nonscale.</i>   |

Of our 684 respondents, 39, or 5.7 percent, could not be scored on this visual perception scale; that is, their responses were so inconsistent that they could not be fitted into any one of the above categories.

b. *Social isolation.* Our measure of social isolation was a weighted index which related the frequency of visiting with friends to membership and participation in clubs and organizations.

| <i>Percent<br/>Distribution</i> | <i>Social Isolation Score</i>  |
|---------------------------------|--|
| 20.0                            | 1. <i>Least isolated.</i> Visits with friends at least once or twice a week and attends organization meetings at least “once in a while.”  |
| 15.9                            | 2. Visits friends once or twice a week and attends meetings either rarely or once in a while; visits less often than once a month but attends meetings regularly; visits at least three times a week but practically never attends meetings. |
| 20.2                            | 3. Visits friends at least three times a week but belongs to no organizations; visits less than once a month and occasionally attends meetings; does not visit at all but regularly attends meetings.  |
| 19.0                            | 4. Visits friends less than once a month but practically never attends meetings; does not visit at all but attends meetings once in a while; visits once or twice a week but belongs to no organization.                                     |
| 24.9                            | 5. <i>Most isolated.</i> Visits friends less than once a month and belongs to no organizations.  |

In the tables in Appendix A the three intermediate groups have been collapsed to form a “moderately isolated” group.

c. *Social activity.* In our measure of social activity, the following weights were employed:

*Society Activity Score*

| <i>Activity</i>                                | <i>Weight</i> |
|--|---------------|
| Attended church in last month                  | 1             |
| Attend organization meetings "once in a while" | 1             |
| Visit friends less than once a week            | 1             |
| Go to store to do shopping                     | 1             |
| Attend organization meetings regularly         | 2             |
| Visit friends once or twice a week             | 2             |
| Visit friends three or more times a week       | 3             |
| Employed; work up to 30 hours a week           | 3             |
| Employed; work more than 30 hours a week       | 4             |

The distribution of weighted scores among our 684 respondents was as follows:

| <i>Percent</i> | <i>Social Activity Scores</i> |
|----------------|-------------------------------|
| 15.1           | 1. 0-4 (least active)         |
| 28.7           | 2. 5-6                        |
| 33.3           | 3. 7-8                        |
| 20.6           | 4. 9-11 (most active)         |
| 2.3            | 5. Nonscale                   |

In the tables in Appendix A the two intermediate groups have been collapsed into a "moderately active" group.

d. *Passive recreation.* The following system of weights was employed in our measure of passive recreation:

| <i>Activity</i>                                     | <i>Weight</i> |
|---|---------------|
| Have sedentary hobbies                              | 1             |
| Listen to radio up to two hours a day               | 1             |
| Gone out to movies in past year                     | 1             |
| Watch TV up to two hours a day                      | 1             |
| Read one book in past month                         | 1             |
| Listen to radio more than 2 and up to 4 hours a day | 2             |
| Watch TV more than 2 and up to 4 hours a day        | 2             |
| Read 2 or 3 books in past month                     | 2             |
| Watch TV more than 4 hours a day                    | 3             |
| Listen to radio more than 4 hours a day             | 3             |
| Read 4 or more books in past month                  | 3             |

The distribution of scores among our 684 respondents was as follows:

| <i>Percent</i> | <i>Passive Recreation Score</i> |
|----------------|---------------------------------|
| 18.1           | 1. 0-2 (least active)           |
| 15.5           | 2. 3                            |
| 19.3           | 3. 4                            |
| 18.3           | 4. 5                            |
| 12.0           | 5. 6                            |
| 16.8           | 6. 7-11 (most active)           |



In the tables the four intermediate groups have been collapsed into a “moderately active” group.

e. *Composite activities score.* Our composite score of activities represented a simple addition of the weighted social activity and passive recreation scores. The distribution of scores was as follows:

| <i>Percent</i> | <i>Composite Activities Score</i> |
|----------------|-----------------------------------|
| 20.8           | 1. 0–8 (least active)             |
| 20.0           | 2. 9–10                           |
| 22.7           | 3. 11–12                          |
| 20.0           | 4. 13–14                          |
| 16.5           | 5. 15–21 (most active)            |

In the tables the three middle groups have been collapsed into a “moderately active” group.

f. *Getting help.* Our measure of the help pattern was an unweighted count of the services which blind respondents had received in the past or were currently receiving. We recognize of course that such services are by no means of equal importance or value. These services included:

- Receiving talking books
- Reading books in braille
- Help from a volunteer reader
- Attendance at a residential school for the blind
- Vocational training or counseling
- Help in going to school or taking courses
- Visits from a home teacher
- Glasses or optical aids
- Travel training or help in traveling
- Help in housework or shopping
- Medical treatment
- Receiving Aid to the Blind
- Receiving Old Age Assistance
- Receiving other public assistance
- Receiving veterans pension disability
- Receiving other disability compensation

The distribution of services received was as follows:

| <i>Percent</i> | <i>Number of Services</i> |
|----------------|---------------------------|
| 17.1           | None                      |
| 23.4           | One                       |
| 18.0           | Two                       |
| 16.2           | Three                     |
| 18.4           | Four to five              |
| 6.9            | Six or more               |

In the tables, the four middle groups have been collapsed into a group which we identified as having received “some” help and the last two into a group which we identified as having received a “great deal” of help.

# Appendix C

## The Questionnaire

ARB-S #122  
American Foundation for the Blind, Inc. May, 1961—Int. #—

### Leisure Activities Study

Questionnaire No.

Serial No.

Name

Tel. No.

Address

City:

Visual Acuity:

L.E. (OS)R.E. (OD)Both (OU)

### Record of Contacts

|                             | 1st  | 2nd  | 3rd  | 4th  | 5th  | 6th  | 7th  | 8th  |
|-----------------------------|------|------|------|------|------|------|------|------|
| Telephone Contact           | Call | Call | Call | Call | Call | Call | Call | Call |
| Date.....                   |      |      |      |      |      |      |      |      |
| Person Spoken to:.....      |      |      |      |      |      |      |      |      |
| Appointment made:           |      |      |      |      |      |      |      |      |
| Time.....                   |      |      |      |      |      |      |      |      |
| Date.....                   |      |      |      |      |      |      |      |      |
| Respondent not home call    |      |      |      |      |      |      |      |      |
| back at.....                |      |      |      |      |      |      |      |      |
| No answer.....              |      |      |      |      |      |      |      |      |
| Telephone disconnected..... |      |      |      |      |      |      |      |      |

### Personal Contact:

Interview completed.....

No one home.....

Respondent not available

(GIVE REASON).....

Refused (GIVE REASON)..

Hello, as you know we are doing a study on how people spend their time, what they are interested in, and how their health is. First we'd like to ask a few questions on how you spend your time.

### Section A

1. Will you tell me what part of the day you enjoy most. (Just think of the way you spend a typical week-day when nothing special is happening—what part of the day do you

enjoy the most?) (RECORD VERBATIM)

4-



(ASK Q. 1a IF PART OF DAY MENTIONED IN Q. 1:)

a. What makes that part of the day particularly enjoyable? (PROBE FULLY FOR DETAILS AND RECORD VERBATIM)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_5-

2. If you had a choice, which *one* of these would you rather do—watch TV, listen to the radio, read or listen to a book, or visit friends?
- Watch TV.....6-1
  - Listen to the radio.....2
  - Read a book.....3
  - Visit friends.....4
  - None of these.....5
  - Don't know.....6

3. About how much time do you spend listening to the radio on an average weekday including the evening?
- Less than an hour.....7-1\*
  - One hour up through two hours..2\*
  - From over 2 hours up through 4 hours.....3\*
  - Over 4—up through 6.....4\*
  - Over 6—up through 8.....5\*
  - Over eight hours.....6\*
  - Don't know.....7\*
  - Don't listen...(GO TO Q. 4)...8

(\*ASK "a," "b" and "c" OF ALL THOSE WHO LISTEN TO THE RADIO)

\* a. What sorts of radio programs do you usually listen to?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_8-

\* b. What *one* type of program do you like best?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_9-

- \* c. Do you *usually* listen to the radio by yourself, or with other members of your family or friends?
- Usually alone.....10-1
  - Usually with others.....2
  - Don't know.....3

4. Is there a television set in your home?
- Yes.....11-1
  - No.....2

(ASK EVERYONE Q. 5:)

5. (Even though you don't have TV) about how much time do you spend watching or listening to television on an average weekday including the evening?
- Less than an hour.....12-1\*
  - One hour up through two hours..2\*
  - Over 2 hours—up through 4....3\*
  - Over 4 hours—up through 6....4\*
  - Over 6 hours—up through 8....5\*
  - Over eight hours.....6\*
  - Don't know.....7\*
  - Don't listen (GO TO Q. 6)....8

(\*ASK "a", "b" and "c" OF ALL THOSE WHO WATCH TV:)

\* a. What sorts of programs do you usually (watch) (listen to) on TV?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_13-

\* b. What one type of program do you like most?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_14-

- \* c. Do you *usually* (watch) (listen to) TV by yourself, or with other members of your family or friends?
- Usually alone.....15-1
  - Usually with others.....2
  - Don't know.....3

6. What kind of music do you like to listen to?  
 Popular, dance, rock and roll..16-1  
 Jazz, rhythm and blues.....2  
 Folk.....3  
 Country and western.....4  
 Show music, musical comedy....5  
 Religious.....6  
 Semi-classical, light opera.....7  
 Classical, operatic, symphonic, chamber.....8  
 Other (SPECIFY)\_\_\_\_\_9  
 None, nothing.....X  
 Don't know.....Y
7. Have you gone out to any musical concerts in the last 12 months?  
 Yes.....17-1  
 No.....2  
 Don't know.....3
8. During the past twelve months have you gone out to the movies?  
 Yes.....5  
 No.....6  
 Don't know.....7
9. Have you gone to any speeches, talks, or lectures in that time?  
 Yes.....9  
 No.....0  
 Don't know.....X
10. About how often do you get together with friends, either in their homes or in yours?  
 Every day or oftener.....18-1  
 Three to six times a week.....2  
 Once or twice a week.....3  
 Two or three times a month....4  
 Once a month.....5  
 Less often than once a month...6  
 Don't get together with friends..7  
 Don't know.....8
11. Do most of your friends live in this neighborhood, or in some other part of town? (Where do *most* live?)  
 This neighborhood.....19-1  
 Some other part of town.....2  
 About half and half.....3  
 Out of town.....4  
 Don't know.....5

12. Do any of your friends have serious trouble with seeing?  
 Yes (ASK "a").....A\*  
 No (GO TO Q. 13).....20-5  
 Don't know (GO TO Q. 13)....6  
 \* a. Do most of your friends have normal vision, or do most of them have serious trouble with seeing?  
 Most have normal vision..1  
 Most have serious trouble..2  
 About half and half.....3  
 Don't know.....4
13. Do you *visit* or belong to any clubs or organizations, including those for persons who have trouble seeing?  
 Yes (ASK Q. "a" and "b")....A\*  
 No (GO TO Q. 14).....21-X  
 Don't know (GO TO Q. 14)....Y  
 \* a. Which ones do you belong to or visit?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \* b. Do you visit the organizations or attend meetings regularly, once in a while, or practically never?  
 Regularly.....22-1  
 Once in a while.....2  
 Never or practically never..3  
 Don't know.....4
14. Aside from any work you may do, do you have any hobbies of any kind?  
 Yes (ASK "a").....A\*  
 No (GO TO Q. 15).....23-1  
 \* a. What are they?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (ASK EVERYONE)
15. What kind of work do you do around the house?  
 Cooking.....24-1  
 Washing dishes.....2



- |                             |                                    |
|-----------------------------|------------------------------------|
| Washing clothes.....3       | 20. Suppose you had normal vision— |
| Ironing clothes.....4       | are there any things that you are  |
| Sweeping, dusting mopping,  | doing now that you might stop      |
| vacuuming.....5             | doing? (Are there any others?)     |
| Making beds.....6           | _____                              |
| All housework.....7         | _____                              |
| Repair, fixing things.....8 | _____                              |
| Other (SPECIFY)_____9       | _____                              |
| _____                       | _____31-                           |
| None, nothing.....X         | _____32-                           |
| Don't know.....Y            |                                    |
16. Do you ever go into any stores to do any shopping?
- Yes.....25-1
- No.....2
17. When you go outside the house (or yard), do you use any kind of aid to help you travel? (What do you use?)
- Yes, use a cane.....26-1
- Yes, use a guide dog.....2
- Yes, use a sighted person.....3
- Yes, other (SPECIFY)\_\_\_\_\_4
- No, do not use an aid.....5
- Do not go outside the house....6
18. Are there any activities (things) that you would like to do more often than you do? (What are they?)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_27-
- \_\_\_\_\_28-
19. Are there any activities (things) that you would like to do but feel that you can't because of your trouble with seeing? (What are they?)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_29-
- \_\_\_\_\_30-
21. In general, do you prefer to do things alone, or with other people?
- Alone.....33-1
- With others.....2
- Both.....3
- Makes no difference.....4
- Don't know.....5
22. Where do you get your information about political or world problems? (About what's going on in the world?)
- \_\_\_\_\_
- \_\_\_\_\_34-
23. How interested would you say you are in political or world problems—very interested, somewhat interested, or not at all interested?
- Very interested.....35-1
- Somewhat interested.....2
- Not at all interested.....3
- Don't know.....4
24. (From what you've heard), what would you say President Kennedy looks like? (PROBE)
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_36-
25. Where do you think you have gotten these ideas (of what President Kennedy looks like)?
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_37-

26. Did you vote in the last presidential election?

- Yes.....38-1
- No (ASK "a").....A\*
- Don't remember or don't know.....Y

\* a. Would you tell me why you didn't vote?

Section B:

27. At present time, do you use any glasses—either ordinary or special glasses or lenses?

- Yes (ASK "a").....39-1\*
- Yes, respondent is wearing glasses (ASK "a").....2\*
- No.....3
- Don't know.....4

\* a. What type of glasses do you use?

- Ordinary glasses for distance and for reading.40-1
- Ordinary glasses for distance alone.....2
- Ordinary glasses for reading alone.....3
- Spectacles with strong reading additions (such as bifocals).....4
- Hand magnifying lenses...5
- Projection instruments....6
- Contact lenses.....7
- Telescopic lenses.....8
- Microscopic lenses.....9
- Protection glasses (dark or frosted).....0
- Other (SPECIFY)\_\_\_\_\_

\_\_\_\_\_X  
Don't know.....Y

Now, we have some questions about your sight. (In answering them, please keep in mind that we are interested in what you see *with correction*, that is, with glasses or special lenses if you use them.)

28. First of all, do you see light—that is, can you tell if a light is on, or whether it is day or night?

- Yes (ASK "a").....A\*
- No (GO TO Q. 32).....41-4
- Don't know (GO TO Q. 32)...5

\* a. Do you see anything besides light?

- Yes (GO TO Q. 29).....1
- No (ASK "b").....2\*
- Don't know (ASK "b")...3\*

\* b. Next will you imagine that you are blind-folded for a day. Are there any things that you usually do that you would have to stop doing?

- Yes (ASK "c").....C\*
- No (GO TO Q. 32)....42-X
- Don't know (GO TO Q. 32).....Y

\* c. What would you have to stop doing?

- Would stop everything...1
- Travel.....2
- Housework.....3
- Work, job.....4
- Reading.....5
- Would stop nothing.....6
- Other (SPECIFY)\_\_\_\_\_7
- Don't know.....8

NOW GO TO Q. 32

(ASK Q. 29-Q. 31 OF EVERYONE WHO CAN SEE ANYTHING BESIDES LIGHT—IF "YES" TO Q. 28a)

29. Now, I'd like to find out a little more about what you're able to see.

Yes No Don't know

a. Can you see things like a telephone pole across the street (or road) (if you are wearing your glasses or lenses)?

1 2 3

b. Can you see a telephone pole on *your* side of the street or road?

4 5 6 43-



|  |   |   |   |     |
|--|---|---|---|-----|
| c. Can you see objects that move, such as cars or people walking?              | 7 | 8 | 9 |     |
| d. Can you see to step down?   | 0 | X | Y |     |
| e. Can you see to step up?   | 1 | 2 | 3 |     |
| f. Can you recognize the features of people you know if they are close enough? | 4 | 5 | 6 | 44- |
| g. Can you see to read ordinary newspaper print at any distance?               | 7 | 8 | 9 |     |
| h. Can you see to read books or magazines in ordinary print?                   | 0 | X | Y |     |

|  |            |
|--|------------|
| 30. (SHOW NEAR VISION CARD)<br>Here's a card I'd like you to look at. You may hold it as close to your eyes as you want to. (If you use glasses or lenses, will you please use them?) Would you tell me the smallest letter or word on this card that you can see? | None.....Y |
| Will you, now, please.....45-1   |            |
| Try to.....2   |            |
| Read.....3   |            |
| This.....4   |            |
| Fine.....5   |            |
| Print.....6  |            |
| 1M.....7   |            |
| 2M.....8   |            |
| 3M.....9   |            |
| 4M.....0   |            |
| 6M*E.....X   |            |
| 31. Next, will you imagine that you are blind-folded for a day. Are there any things that you usually do that you would have to stop doing?  |            |
| Yes (ASK "a").....A  |            |
| No.....46-X  |            |
| Don't know.....Y   |            |
| a. What would you have to stop doing?  |            |
| Would stop everything....1   |            |
| Travel.....2   |            |
| Housework.....3  |            |
| Work, job.....4  |            |
| Reading.....5  |            |
| Would stop nothing.....6   |            |
| Other (SPECIFY).....7  |            |

|  |          |
|--|----------|
| 32. How old were you when your trouble with seeing began to make it very hard for you to carry on your daily life, such as reading, working, etc.? |          |
| Under 3 years.....1  | GO TO    |
| 3-7 years.....2  | Q. 37    |
| 8-13 years.....3   |          |
| 14-19 years.....4  |          |
| 20-29 years.....5  |          |
| 30-39 years.....6  |          |
| 40-49 years.....7  |          |
| 50-59 years.....8  | ASK      |
| 60-69 years.....9  | Q. 33-36 |
| 70-79 years.....0  |          |
| 80 and over.....X  |          |
| Don't remember.....Y   |          |

ASK Q. 33-36 OF THOSE WHO WERE 14 AND OLDER WHEN THEIR TROUBLE WITH SEEING STARTED.

The next few questions are about things that you did before your trouble with seeing started.

33. Did you ever read books or magazines in ordinary print?  
Yes.....48-1  
No.....2  
Don't remember.....3

34. Did you ever use the public library (before you had trouble with seeing)?  
Yes.....5  
No.....6  
Don't remember.....7

35. Were you employed (before you had trouble with seeing)?  
Yes (ASK "a").....A\*
- No.....49-X

\* a. What was your occupation? (What kind of work did you do)?  
\_\_\_\_\_  
\_\_\_\_\_

36. Would you say that you get together with friends more *now* than you did before your trouble with seeing, about the same as before, or less often than before?  
More now.....50-1  
About the same.....2  
Less than before.....3  
Don't know.....4

Section C

Now we're going to ask a few questions about books and reading. Whenever we ask about books, we mean either bound or recorded books, and not magazines or comic books. Whenever we ask about reading, we mean whether you read the book yourself, or listen to a record, or listen to someone else reading a book.

37. First of all, how would you describe a person who reads a great many books? (What sort of a person do you think he is?) (PROBE)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
51-  
52-

38. How would you describe a person who reads very few books or none at all? What sort of a person do you think he might be? (PROBE)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
53-  
54-

39. Now how about yourself? At the present time are you personally getting any books on phonograph records delivered where you live?  
Yes (ASK QUESTIONS 40-44, THEN GO TO Q. 48).....55-1  
No (GO TO Q. 45).....2

(ASK Qs. 40-44 OF THOSE GETTING BOOKS ON RECORDS—"YES" TO Q. 39)

40. From what library or organization are you getting them?  
\_\_\_\_\_  
\_\_\_\_\_56-



41. Are any of these records talking book records? That is, records made by the Library of Congress in Washington and sent out by the library in\_\_\_\_\_?

Yes.....57-1  
No.....2  
Don't know.....3

42. What kind of condition have most of the records been in that you have received—have they been in excellent condition, good, fair or poor?

Excellent.....58-1  
Good.....2  
Fair.....3  
Poor (ASK "a").....A\*  
Don't know.....Y

\* a. What was wrong with them?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

43. When you play records, do you usually listen alone or with others?

Alone.....59-1  
With others.....2  
Both.....3  
Don't know.....4

44. Do you have a talking book machine?

Yes (ASK "a").....A\*  
No.....60-Y

\* a. Is your Talking Book Machine or record player in excellent condition, good, fair, or poor?

Excellent.....1  
Good.....2  
Fair.....3  
Poor (ASK "b").....B\*  
Don't know.....X

\* b. What is wrong with it?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(ASK Qs. 45-47 OF THOSE NOT GETTING BOOKS ON RECORDS—"NO" TO Q. 39)

45. Have you ever listened to recorded books in the past?

Yes (ASK "a").....A\*  
No.....61-X  
Don't know.....Y

\* a. How is it you no longer listen to them?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

46. Have you ever heard about talking book records? I mean the records made by the Library of Congress in Washington and sent out by the library in\_\_\_\_\_?

Yes.....62-1  
No.....2

47. How interested would you be in receiving free books on records that would come through the mail along with a machine to play them on—would you be very interested, fairly interested, or not at all interested?

Very.....4  
Fairly.....5  
Not at all.....6  
Don't know.....7

(ASK EVERYONE)

48. Suppose you could get records that had twice or even four times as many hours of listening as talking book records—how interested would you be in getting them—very interested, fairly interested or not at all interested?

NOW GO TO QUESTION 48

CARD 2

Very interested.....4-1  
Fairly interested.....2  
Not at all interested  
(ASK "a").....A\*  
Don't know.....Y

\* a. Will you tell me why not?

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49. Do you have a tape recorder?  
Yes.....5-1  
No.....2

50. If you could get tapes that were easy to operate and had up to 12 hours of listening on one tape, how interested would you be in getting them—very interested, fairly interested or not at all interested?

Very interested.....6-1  
Fairly interested.....2  
Not at all interested  
(ASK "a").....A\*  
Don't know.....Y

\* a. Will you tell me why not?

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51. Are you able to read braille?  
Yes (ASK Q. 52).....7-1  
No (GO TO Q. 53).....2

(ASK Q. 52 OF THOSE WHO CAN READ BRAILLE)

52. At the present time are you reading any book in braille?

Yes (ASK "a" and "b")....A\*  
No (GO TO Q. 54).....8-X

\* a. From what library or organization are you getting braille books?

---

\* b. What kind of condition are most of the books in that you have received—are most of them in excellent, good, fair, or poor condition?

Excellent condition.....9-1  
Good condition.....2

Fair condition (ASK "c").3\*  
Poor condition (ASK "c").4\*  
Don't know.....5

\* c. What was wrong with them?

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(ASK Q. 53 OF THOSE WHO CANNOT READ BRAILLE)

53. Did you ever read braille in the past?

Yes (ASK "a").....A\*  
No (GO TO Q. 54).....11-X  
Don't know (GO TO Q. 54)..Y

\* a. How does it happen that you no longer read it?

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ASK Q. 54 OF EVERYONE WHO IS ABLE TO SEE MORE THAN LIGHT—IF "YES" TO Q. 28a

54. At the present time, are you reading any books in ordinary print?

Yes.....12-1  
No.....2

ASK EVERYONE Qs. 55-58

55. Aside from books, are you getting any magazines (in braille, on records, or in ordinary print)?

Yes (ASK "a").....A  
No.....13-X

a. Which magazines are you reading?

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56. At the present time, are you having any books read to you? (Are they read to you regularly or occasionally?)



- \*Yes, regularly.....14-1
- \*Yes, occasionally.....2\*
- No.....3
- 57. What about newspapers—are you having any read to you? (Are they read regularly or occasionally?)
  - \*Yes, regularly.....15-1\*
  - \*Yes, occasionally.....2\*
  - No.....3
- 58. And are you having any magazines read to you? (Regularly or occasionally?)
  - \*Yes, regularly (ASK "a")
    - .....16-1\*
  - \*Yes, occasionally (ASK "a").....2\*
  - No.....3
- a. Which magazines are you reading?
 

17-

ASK Q. 59 OF *EVERYONE* WHO IS HAVING NEWSPAPERS, BOOKS OR MAGAZINES READ \*

- 59. Who usually reads to you—somebody in your family, a friend or neighbor, or a volunteer from a local agency?
  - Somebody in family.....18-1
  - Friend or neighbor.....2
  - Volunteer reader (GO TO Q. 62).....3
  - Other (SPECIFY).....4

ASK QUESTIONS 60 and 61 OF *EVERYONE*—Except those using volunteer readers in Q. 59

- 60. Have you ever heard about the services provided by volunteers reading books or magazines to people having serious trouble with seeing?
  - Yes.....19-1
  - No.....2
  - Don't know.....3

- 61. How interested would you be in having volunteers read newspapers, magazines or books to you—very interested, fairly interested, or not at all interested?
  - Very interested.....20-1
  - Fairly interested.....2
  - Not at all interested.....3
  - Don't know.....4

(ASK *EVERYONE*)

- 62. (Whether you read the book yourself, listened to a record or to someone else reading) when did you last spend any time reading or listening to a book?
 

|              |   |  |
|--------------|---|--|
| ASK Q. 63-64 | { | Today.....21-1<br>Yesterday.....2<br>Two to six days ago...3<br>Seven to thirteen days..4<br>Two weeks up to a month.....5 |
| GO TO Q. 64  | { | Two to three months ago.....6<br>Four to six months ago..7<br>Don't remember.....8   |
| GO TO Q. 65  | { | Over six months ago..9<br>Never.....0  |

(ASK Q. 63 OF *EVERYONE* WHO HAS READ A BOOK WITHIN THE PAST MONTH)

- 63. During the past month, about how many books would you say you have read either in whole or in part?
  - One.....22-1
  - Two.....2
  - Three.....3
  - Four.....4
  - Five.....5
  - Six or more.....6
  - Don't know.....7

(ASK Q. 64 OF *EVERYONE* WHO HAS READ A BOOK WITHIN THE PAST SIX MONTHS)

- 64. It may be hard to say, but about how many books have you read in whole or in part during the past six months?—Just your best guess.

- GO TO Q. 69 { One.....23-1  
Two or three.....2  
Four or five.....3  
Six or seven.....4  
Eight or nine.....5  
Ten to fourteen.....6  
Fifteen to nineteen.....7  
Twenty or more.....8  
Don't know.....9

None (ASK Q. 65-68)..0

ASK Q. 65-68 OF EVERYONE WHO HAS *NOT* READ A BOOK WITHIN THE LAST SIX MONTHS

65. Would you mind telling me why you haven't read a book during the past six months? (PROBE)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
24-

66. Can you think of anything that might make you *want* to read a book? (PROBE)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
25-

67. What subjects would you be interested in?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
26-  
27-

68. Do you personally feel that you have a need for any of these book services, such as—braille books, recorded books, or volunteer readers?

- Yes.....28-1  
No (ASK "a").....A\*  
Don't know.....Y

\* a. Will you tell me why not?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOW GO TO Q . 77

ASK Qs. 69-76 OF EVERYONE WHO *HAS* READ A BOOK WITHIN PAST SIX MONTHS

69. On the whole, would you say you are presently reading about as many books as you would like to, or fewer? (Somewhat fewer or many fewer?)

- About as many.....29-1  
Somewhat fewer (ASK "a")..2\*  
Many fewer (ASK "a")....3\*  
Don't know.....4

\* a. Why is that?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
30-

IF TROUBLE WITH SEEING BEGAN *AFTER* AGE 30 (SEE Q. 32) ASK Q. 70  
IF BEGAN *BEFORE* AGE 30, SKIP Q. 70 AND GO TO Q. 71

70. How does the amount that you read *now* compare with the reading you did before you had serious trouble with your eyes—do you read more now, about the same, or less than before?

- Read more now.....31-1  
Read the same now.....2  
Read less now.....3  
Don't know.....4

71. How do you do *most* of your reading—(in ordinary print, in braille, with records, or with the help of a sighted reader?)

- Ordinary print.....32-1  
Braille.....2  
Records.....3  
Sighted reader.....4  
Other (SPECIFY)\_\_\_\_\_5  
Don't know.....6



72. What kinds or types of books do you like to read—what subjects are you interested in? (What others?) (DO NOT READ LIST)  
a. What *one* kind or type of book do you like *most* to read?

|                              | Read | Like<br>Most |
|------------------------------|------|--------------|
| FICTION                      |      |              |
| Adventure.....               | 33-1 | 35-1         |
| Detective, Mystery.....      | 2    | 2            |
| Love, Romances.....          | 3    | 3            |
| Historical Fiction.....      | 4    | 4            |
| Science Fiction.....         | 5    | 5            |
| Westerns.....                | 6    | 6            |
| All other novels, fiction... | 7    | 7            |

NON-FICTION

|  |      |      |
|--|------|------|
| Biography.....                             | 8    | 8    |
| Books about blindness or<br>the blind..... | 9    | 9    |
| Bible.....                                 | 0    | 0    |
| Other religious books.....                 | X    | X    |
| Current Events.....                        | Y    | Y    |
| History.....                               | 34-1 | 36-1 |
| Science, technical.....                    | 2    | 2    |
| Travel, description of<br>places.....      | 3    | 3    |

OTHER

|                      |   |   |
|----------------------|---|---|
| Drama, Plays.....    | 4 | 4 |
| Humor.....           | 5 | 5 |
| Poetry.....          | 6 | 6 |
| OTHER (SPECIFY)_____ |   |   |

73. Are there any kinds or types of books that you would like to read that are not available in records or in braille now?  
Yes (ASK "a").....37-1\*  
No.....2  
Don't know.....3

\* a. What kinds or types of books do you have in mind? (What subjects are you thinking of?)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
38-  
39-

74. On the whole, how satisfied are you with library services you are getting—very satisfied, fairly satisfied, or not at all satisfied?  
Very satisfied.....40-1  
Fairly satisfied.....2  
Not satisfied (ASK "a")....A\*  
Don't use the library.....X  
Don't know.....Y

\* a. Why is that?\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

75. Are there any ways in which you think library services in this area can be improved?  
Yes (ASK "a").....A\*  
No.....41-X  
Don't know.....Y

\* a. What do you have in mind?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

76. Have you ever had any difficulties in receiving and returning books or records through the mail?  
Yes (ASK "a").....A\*  
No.....42-X  
Don't know.....Y

\* a. What difficulties have you had?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(ASK EVERYONE)

77. How important do you think it is for a person to read the great classics of the past, that is, books like Shakespeare's plays, *War and Peace* by Tolstoy, or *Huckleberry Finn* by Mark Twain—would you say it is very important, fairly important, or not important at all?

Very important.....43-1  
Fairly important.....2  
Not important at all (ASK  
"a").....A\*  
Don't know, no opinion.....Y

- \* a. Why don't you think it's important?

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78. How important do you think it is for a person to keep up with the books that are published these days—very important, fairly important, or not important at all?

Very important.....44-1  
Fairly important.....2  
Not important at all (ASK  
"a").....A\*  
Don't know, no opinion.....Y

- \* a. Why don't you think it's important?

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79. Some people feel that certain books or parts of books should not be made available to blind readers because of the language used or viewpoints expressed. Do you agree with this or disagree? (Do

you feel strongly or not so strongly?)

Strongly agree (ASK "a") 45-1\*  
Agree (ASK "a").....2\*  
Disagree.....3  
Strongly disagree.....4  
Undecided.....5

- \* a. What kinds of books are you thinking of?

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46-

80. Would you say that your father is (was) a heavy book reader, fairly heavy book reader, light reader, or doesn't (didn't) he read any books at all? What about your mother?

|                       | Father | Mother |
|-----------------------|--------|--------|
| Heavy reader..1.....  | 7      | 47-    |
| Fairly heavy...2..... | 8      |        |
| Light reader...3..... | 9      |        |
| Didn't read....4..... | 0      |        |
| Don't know...5.....   | X      |        |

ASK Qs. 81 & 82 IF RESPONDENT LIVES WITH SIGHTED PERSONS.

81. How about the other members of your family—would you say they are (were) heavy book readers, moderate readers, light readers, or don't (didn't) they read any books at all?

Heavy readers.....48-1  
Moderate readers.....2  
Light readers.....3  
Didn't read.....4  
Don't know.....5

82. About how many ordinary books do you have here in your home? (I mean including the ordinary books that belong to all the different members of your family?)

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49-

Section D

83. Now I have some statements I would like to read to you. You probably have heard people say these things and may or may not agree with them. The first one is:



|  | AGREE         |                 |                | DISAGREE        |               | Don't<br>Under-<br>stand |
|--|---------------|-----------------|----------------|-----------------|---------------|--------------------------|
|  | Strong-<br>ly | Moder-<br>ately | Unde-<br>cided | Moder-<br>ately | Strong-<br>ly |                          |
| a. "Nowdays a per-<br>son has to live<br>pretty much for<br>today and let to-<br>morrow take care<br>of itself." As far as<br>you are concerned,<br>do you agree or<br>disagree with this?<br>(Strongly or mod-<br>erately?) | 1             | 2               | 3              | 4               | 5             | 6                        |
| b. Here's another.<br>"It's hardly fair to<br>bring children into<br>the world with the<br>way things look<br>for the future." Do<br>you agree or dis-<br>agree? (Strongly<br>or moderately?)                                | 7             | 8               | 9              | 0               | X             | Y 50-                    |
| c. "In spite of what<br>some people say,<br>the lot of the aver-<br>age man is getting<br>worse." Do you<br>agree or disagree?   | 1             | 2               | 3              | 4               | 5             | 6                        |
| d. "These days a per-<br>son doesn't really<br>know whom he can<br>count on." Do you<br>agree or disagree?   | 7             | 8               | 9              | 0               | X             | Y 51-                    |
| e. And, do you agree<br>or disagree with<br>this statement:<br>"There's little use<br>in writing to pub-<br>lic officials because<br>often they aren't<br>really interested<br>in the problems of<br>the average man."       | 1             | 2               | 3              | 4               | 5             | 6 52-                    |

84. Everybody of course has some things he worries about, more or less. Would you say you worry more now than you used to, or not as much?

- More.....53-1
- About the same.....2
- Not as much.....3
- Never worry.....4
- Don't know.....5

85. What kind of things do you worry about most?\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_54-

\_\_\_\_\_55-

86. In general, which *one* of these would you say is the most serious condition that a person can have—deafness, cerebral palsy, paralysis, a missing arm or leg, or serious trouble with seeing?
- Deafness.....56-1
  - Cerebral palsy.....2
  - Paralysis.....3
  - Missing arm or leg.....4
  - Serious trouble with seeing....5
  - Don't know.....6

87. What would you say is the most important problem faced by a blind person? (PROBE)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_57-

\_\_\_\_\_58-

88. Some people who can see to some extent consider themselves blind, and others don't. Do you consider yourself blind, or not?
- Yes.....59-1
  - No.....2
  - Don't know.....3

89. At the present time do you have any other ailments or conditions that have continued for a long time, even though they don't bother you all the time?
- Yes (ASK "a").....60-1\*
  - No.....2
  - Don't know.....3

\* a. Will you tell me what they are?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_61-

90. Who usually takes care of you when you are sick? Is it your (wife) (husband), some other member of your family, a neighbor, a friend, or someone else?
- Spouse.....62-1
  - Other member of family.....2
  - Neighbor.....3
  - Friend.....4
  - Other (SPECIFY)\_\_\_\_\_5
  - No one.....6
  - Don't know.....7

*Section E*

Now, I have just a few more questions about yourself.

91. How long have you lived in (CITY OR TOWN)?

92. And how long have you lived at your present address?



CARD 3

- |                  |         |         |  |
|------------------|---------|---------|--|
|                  | 91      | 92      |  |
|                  | City    | Present |  |
|                  | Town    | Address |  |
| Less than a year | 1.....7 | 4-      |  |
| One-two years    | 2.....8 |         |  |
| Over two-five    | 3.....9 |         |  |
| Over five-ten    | 4.....0 |         |  |
| Over ten years   | 5.....X |         |  |
| Don't know       | 6.....Y |         |  |
93. Do you rent, board, own your own home, or what?
- Rent.....5-1
- Board.....2
- Own.....3
- Live in household belonging to other family member.4
- Other (SPECIFY).....5
94. Do you have a telephone?
- Yes.....6-1
- No.....2
95. What was the highest grade of school you completed?
- None or some grammar school.7-1
- Finished grammar school.....2
- Some high school.....3
- Finished high school.....4
- Some college.....5
- Finished college.....6
- Graduate or professional school.7
- Don't remember.....8

ASK "a" IF RESPONDENT BECAME BLIND BEFORE AGE 20—SEE Q. 32:

- a. Was any of this in residential schools for the blind?
- Yes.....8-1
- No.....2
- Don't remember.....3
- (ASK EVERYONE)
96. Are you still taking any courses, including correspondence courses?
- Yes.....9-1
- No.....2

97. Are there any skills or crafts that you would like to learn?

Yes (ASK "a").....A\*

No.....10-X

Don't know.....Y

\* a. What are they?

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98. Are you presently employed?

Yes.....11-1

ASK Qs. 99-102 OF THOSE EMPLOYED

99. Are you self-employed, or employed by someone else?

Self employed.....12-1

Someone else (ASK "a")....A\*

\* a. What does the organization you work for do?

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100. What is your occupation?

.....13-

a. Exactly what do you do?

.....14-

101. How many hours a week do you work?

Less than ten hours.....15-1

Ten to twenty hours.....2

Twenty one to thirty.....3

Thirty one to forty.....4

Over forty hours.....5

Don't know.....6

102. On the whole, would you say you are very satisfied with your present job, fairly satisfied, or not satisfied at all?

Very satisfied.....16-1

Fairly satisfied.....2

Not satisfied at all.....3

Undecided.....4

GO TO QUESTION 105

ASK Qs. 103 & 104 OF THOSE EMPLOYED

103. Did you ever work in the past?  
Yes (ASK "a" & "b")..12-1\*  
No.....2

\* a. What kind of work did you do?

\* b. What years did you do that?

| a.<br>Kind of Work | b.<br>Years |
|--------------------|-------------|
| _____              | _____       |
| _____              | _____       |
| _____              | _____       |
| _____              | _____       |
| _____              | _____       |
| _____              | 13-         |
| _____              | 14-         |
| _____              | 15-         |

104. Are you now looking for work, retired, or what?  
Looking for work.....16-1  
Retired.....2  
Unable to work.....3  
Voluntarily idle.....4  
Student.....5  
Housewife.....6  
Other (SPECIFY)\_\_\_\_\_7

(ASK EVERYONE)

105. Have you ever had any vocational or job training since having serious trouble with seeing?  
Yes.....17-1  
No.....2  
Don't remember.....3

106. What (is) (was) your father's occupation? Exactly what (does) (did) he do?  
\_\_\_\_\_  
\_\_\_\_\_18-

107. Would you mind telling me your age?  
21-29.....19-1  
30-39.....2  
40-49.....3

50-59.....4  
60-64.....5  
65-69.....6  
70-74.....7  
75-79.....8  
80 and over.....9  
Refused.....0

108. Are you single, married, widowed or divorced?  
Single (GO TO Q. 109)...20-1  
Married (ASK "a" & "b")..2\*  
Widowed (ASK "a" & "b")..3\*  
Divorced or separated (ASK "a" & "b").....4\*  
\* a. Is (was) your husband (wife) blind or sighted?  
Blind.....21-1  
Sighted.....2  
\* b. Do you have any children?  
Yes.....22-1  
No.....2

109. Do you live alone or with others?  
Alone (ASK Q. 110).....23-1  
With others (ASK Q. 111 & 112).....2  
In institution (ASK Q. 110)..3

(IF LIVES ALONE OR IN INSTITUTION, ASK Q. 110)

110. Are there any other members of your family living in or near (CITY OR TOWN)?  
Yes (ASK "a").....A\*  
No.....24-9  
\* a. About how often do you visit with other members of your family?  
Every day.....1  
Three to six times a week..2  
Once or two times a week..3  
Two or three times a month.....4  
Once a month.....5  
Less often than once a month.....6  
Don't visit.....7  
Don't know.....8

(IF LIVES WITH OTHERS, ASK Q. 111 & 112)

111. How are you related to the head of the household? (ENTER RE-



LATIONSHIP TO HEAD; FOR  
EXAMPLE—HEAD, WIFE,  
DAUGHTER, GRANDSON,  
MOTHER-IN-LAW, PARTNER,  
LODGER, LODGER'S WIFE,  
ETC.)

25-

112. Are any other members of the household regularly employed?

Yes (ASK "a").....A\*  
No.....26-X

\* a. What do (does) (he) (she) (they) do?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

113. We'd like to know if you've received any help or services from public or private agencies serving blind persons—including visits from representatives of the agency.

For example, have you received any—(ASK FOR EACH ITEM BELOW)?

|  | Not<br>Yes No Sure |   |   |     |
|--|--------------------|---|---|-----|
| a. Vocational training or counseling         | 1                  | 2 | 3 |     |
| b. Help in going to school or taking courses | 4                  | 5 | 6 | 27- |
| c. Visits from a home teacher                | 7                  | 8 | 9 |     |
| d. Glasses or optical aids                   | 0                  | X | Y |     |
| e. Travel training or help in traveling      | 1                  | 2 | 3 |     |
| f. Help in housework or shopping             | 4                  | 5 | 6 | 28- |
| g. Medical treatment                         | 7                  | 8 | 9 |     |

114. Are you presently receiving any financial help from public or private agencies?

Yes (ASK "a").....A\*  
No (GO TO Q. 115)....29-X

\* a. What kind of financial help do you receive—is it aid to the blind, old age assistance, some other public assistance, social security payments (old age, survivors and disability insurance) or what  
Aid to the Blind.....1  
Old Age Assistance.....2  
Other Public Assistance..3  
Social Security.....4  
Other (SPECIFY)\_\_\_\_\_5  
Don't know.....0

115. Are there any particular kinds of help or services that you would like to get because of your trouble with seeing?

Yes (ASK "a").....A\*  
No.....30-X

\* a. What do you have in mind? (PROBE)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

116. The state of\_\_\_\_\_ keeps a list of blind residents to help in planning services for them. Do you mind having your name listed by an agency for the blind like the one in your state?

Yes (ASK "a").....A\*  
No.....31-X  
Don't know.....Y

\* a. What objections do you have?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

117. If a person with serious trouble seeing is unable to support himself, from which *one* source do you think he should receive help—his family, or the government.

Family.....32-1  
 Family, if they have the means.....2  
 Government.....3  
 Don't know.....4

118. Would you mind telling me what your total income was last year for yourself and other members of the household?

Under \$500.....33-1  
 \$500-\$999.....2  
 \$1000-\$1999.....3  
 \$2000-\$2999.....4  
 \$3000-\$3999.....5  
 \$4000-\$4999.....6  
 \$5000-\$5999.....7  
 \$6000 and over.....8  
 Don't know.....9  
 Refused.....0

119. Have you attended church or religious services in the last month?

Yes.....34-1  
 No.....2  
 Can't remember.....3

120. Would you mind telling me your religious preference?

Protestant.....35-1  
 Catholic.....2  
 Jewish.....3  
 Other.....4  
 None.....5  
 Don't know, no answer.....6

121. Now before I go, I have a list of words I'd like to ask you about. We are trying to find out how familiar people are with them. If you would like to have me repeat them or spell them, just let me know. Let's start with \_\_\_\_\_. What does\_\_\_\_\_ mean?

(START WITH "WINTER" FOR PERSON OF AVERAGE VERBAL ABILITY: FOR THOSE WITH LESS THAN AVERAGE, START WITH "BED":)

36-37

- (1) Bed\_\_\_\_\_
- (2) Ship\_\_\_\_\_
- (3) Penny\_\_\_\_\_
- (4) Winter\_\_\_\_\_
- (5) Repair\_\_\_\_\_
- (6) Breakfast\_\_\_\_\_
- (7) Fabric\_\_\_\_\_
- (8) Slice\_\_\_\_\_
- (9) Assemble\_\_\_\_\_
- (10) Conceal\_\_\_\_\_
- (11) Enormous\_\_\_\_\_
- (12) Hasten\_\_\_\_\_
- (13) Sentence \_\_\_\_\_
- (14) Regulate\_\_\_\_\_
- (15) Commence\_\_\_\_\_
- (16) Ponder\_\_\_\_\_
- (17) Cavern\_\_\_\_\_
- (18) Designate\_\_\_\_\_
- (19) Domestic\_\_\_\_\_
- (20) Consume\_\_\_\_\_
- (21) Terminate\_\_\_\_\_
- (22) Obstruct\_\_\_\_\_
- (23) Remorse\_\_\_\_\_
- (24) Sanctuary\_\_\_\_\_
- (25) Matchless\_\_\_\_\_





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Josephson, Eric.  
The social life  
of blind people

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AMERICAN FOUNDATION FOR THE BLIND,  
15 WEST 16th STREET  
NEW YORK, N.Y. 10011



